NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION** (1) (2) (3) (4) (5) (6) FY 2013 FY 2014 AMOUNT LINE DESCRIPTION **ACTUAL** DIFFERENCE DIFFERENCE **ACTUAL ASSETS Current Assets:** Cash and Cash Equivalents \$2,221,385 \$1,731,840 (\$489,545)-22% Short Term Investments \$0 \$0 0% Accounts Receivable (Less: Allowance for Doubtful Accounts) \$7.314.799 \$6.782.651 (\$532.148)-7% 0% Current Assets Whose Use is Limited for Current Liabilities \$0 \$0 \$0 5 Due From Affiliates \$0 \$0 \$0 0% Due From Third Party Payers \$0 \$0 0% 6 \$0 4% 7 \$1,521,171 \$1,588,724 \$67,553 Inventories of Supplies Prepaid Expenses 11% \$371,475 \$411,351 \$39,876 0% Other Current Assets \$0 \$0 \$0 -8% **Total Current Assets** \$11,428,830 \$10,514,566 (\$914,264) В. Noncurrent Assets Whose Use is Limited: \$0 0% Held by Trustee \$0 \$0 \$0 0% 2 Board Designated for Capital Acquisition \$0 \$0 Funds Held in Escrow \$0 \$0 \$0 0% Other Noncurrent Assets Whose Use is Limited \$0 \$0 \$0 0% Total Noncurrent Assets Whose Use is Limited: \$0 0% \$0 \$0 Interest in Net Assets of Foundation \$11,319,493 \$10.840.989 -4% (\$478,504)\$0 \$0 \$0 0% 6 Long Term Investments 3% Other Noncurrent Assets \$4,652,903 \$4,789,007 \$136,104 **Net Fixed Assets:** C. Property, Plant and Equipment \$93,199,231 \$97,225,461 \$4,026,230 4% Less: Accumulated Depreciation \$63,868,519 \$69,346,293 \$5,477,774 9% Property, Plant and Equipment, Net \$29,330,712 \$27,879,168 (\$1,451,544)-5% 181% Construction in Progress \$4,537,992 \$12,765,062 \$8,227,070 **Total Net Fixed Assets** \$33,868,704 20% \$40,644,230 \$6,775,526 9% **Total Assets** \$61,269,930 \$66,788,792 \$5,518,862

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION** (1) (2) (3) (4) (6) (5) FY 2013 FY 2014 AMOUNT LINE DESCRIPTION DIFFERENCE DIFFERENCE **ACTUAL ACTUAL** LIABILITIES AND NET ASSETS A. **Current Liabilities:** Accounts Payable and Accrued Expenses \$2.903.944 \$3.789.982 \$886.038 31% 0% 2 Salaries, Wages and Payroll Taxes \$2,391,153 \$2,394,662 \$3,509 41% 3 Due To Third Party Payers \$1,973,652 \$2,776,797 \$803.145 (\$2,427,657) Due To Affiliates \$6.514.591 \$4,086,934 -37% 5 Current Portion of Long Term Debt \$0 0% \$0 \$0 0% Current Portion of Notes Payable \$0 \$0 \$0 0% Other Current Liabilities \$0 \$0 \$0 **Total Current Liabilities** \$13,783,340 \$13,048,375 (\$734,965)-5% B. Long Term Debt: 0% Bonds Payable (Net of Current Portion) \$0 \$0 \$0 Notes Payable (Net of Current Portion) \$2,476,284 \$1,082,488 -56% (\$1,393,796)**Total Long Term Debt** \$2,476,284 \$1,082,488 (\$1,393,796) -56% \$18,529,628 40% \$13,282,674 \$5,246,954 3 Accrued Pension Liability 0% Other Long Term Liabilities \$0 \$0 \$0 \$15,758,958 24% **Total Long Term Liabilities** \$19,612,116 \$3,853,158 Interest in Net Assets of Affiliates or Joint Ventures \$0 \$0 \$0 0% Net Assets: 12% Unrestricted Net Assets or Equity \$23,332,942 \$26,205,321 \$2,872,379 Temporarily Restricted Net Assets \$4,125,215 \$3,596,815 (\$528,400)-13% Permanently Restricted Net Assets \$4,269,475 \$4,326,165 \$56.690 1% **Total Net Assets** \$31,727,632 \$34,128,301 \$2,400,669 8% **Total Liabilities and Net Assets** \$61,269,930 \$66,788,792 \$5,518,862 9%

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014 REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION** (1) (2) (4) (5) (6)FY 2013 FY 2014 **AMOUNT ACTUAL** LINE DESCRIPTION **ACTUAL DIFFERENCE** DIFFERENCE **Operating Revenue:** -7% Total Gross Patient Revenue \$184.161.328 \$172.137.054 (\$12,024,274)2 Less: Allowances \$110,830,443 \$107,352,613 -3% (\$3,477,830)3 Less: Charity Care \$1,048,931 \$934,301 (\$114,630)-11% Less: Other Deductions \$0 0% \$0 \$0 **Total Net Patient Revenue** \$72,281,954 \$63.850.140 (\$8,431,814)-12% 5 Provision for Bad Debts -30% \$2,560,334 \$1,786,094 (\$774,240)Net Patient Service Revenue less provision for bad (\$7,657,574) debts \$69.721.620 \$62,064,046 -11% 6 Other Operating Revenue \$1,026,861 \$981,148 -4% (\$45,713)7 Net Assets Released from Restrictions \$130,298 \$18,850 (\$111,448)-86% \$70,878,779 \$63,064,044 -11% **Total Operating Revenue** (\$7,814,735)**Operating Expenses:** -14% Salaries and Wages 1 \$28,966,264 \$24,814,588 (\$4,151,676)2 Fringe Benefits \$8,632,365 \$6,580,412 (\$2,051,953)-24% 3 Physicians Fees \$6,420,799 \$6,700,193 \$279.394 4% 4 Supplies and Drugs \$9,771,389 \$9,063,608 (\$707,781)-7% 5 Depreciation and Amortization \$5,443,180 \$5,477,484 \$34,304 1% 0% 6 **Bad Debts** \$0 \$0 \$0 Interest Expense \$263,572 \$128,030 (\$135,542)-51% 1% 8 Malpractice Insurance Cost \$2,065,738 \$2,092,746 \$27,008 Other Operating Expenses \$11,398,992 \$10,226,137 (\$1,172,855)-10% **Total Operating Expenses** \$72,962,299 \$65,083,198 (\$7,879,101)-11% -3% Income/(Loss) From Operations (\$2,083,520)(\$2,019,154)\$64,366 C. **Non-Operating Revenue:** Income from Investments \$0 \$0 \$0 0% \$0 \$0 \$0 0% 2 Gifts, Contributions and Donations 3 Other Non-Operating Gains/(Losses) \$0 \$0 \$0 0% \$0 \$0 \$0 0% **Total Non-Operating Revenue** Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) (\$2,083,520)(\$2,019,154)\$64,366 -3% Other Adjustments:

\$0

\$0

\$0

0%

Unrealized Gains/(Losses)

	NEW	/ MILFORD HOSPITA	L		
	IWELVE	MONTHS ACTUAL F	ILING		
	F	FISCAL YEAR 2014			
	REPORT 150 - HOSPITAL S	TATEMENT OF OPE	RATIONS INFORMA	ATION	
(1)	(2)	(3)	(4)	(5)	(6)
	·	FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$2,083,520)	(\$2,019,154)	\$64,366	-3%
	Principal Payments	\$1,508,855	\$1,339,233	(\$169,622)	-11%

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DITTERCE	DILITERCE
	CDOSS DEVENUE DV DAVED				
I.	GROSS REVENUE BY PAYER				
^	INPATIENT GROSS REVENUE				
A.	MEDICARE TRADITIONAL	\$26,131,519	\$25,333,528	(\$797,991)	20/
2	MEDICARE MANAGED CARE	\$3,274,711	\$3,303,838	\$29,127	-3% 1%
3	MEDICARE MANAGED CARE	\$4.213.322	\$4,500,265	\$286,943	7%
4	MEDICAID MEDICAID MANAGED CARE	\$0	\$4,300,203	\$200,943	0%
5	CHAMPUS/TRICARE	\$40,134	\$54,360	\$14,226	35%
6	COMMERCIAL INSURANCE	\$945,553	\$985,992	\$40,439	4%
7	NON-GOVERNMENT MANAGED CARE	\$11,713,504	\$9,754,576	(\$1,958,928)	-17%
8	WORKER'S COMPENSATION	\$759,534	\$770,930	\$11,396	2%
9	SELF- PAY/UNINSURED	\$622,422	\$412.623	(\$209,799)	-34%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$123,882	\$149,801	\$25,919	21%
	TOTAL INPATIENT GROSS REVENUE	\$47,824,581	\$45,265,913	(\$2,558,668)	-5%
B.	OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$49,775,839	\$44,719,911	(\$5,055,928)	-10%
2	MEDICARE MANAGED CARE	\$6,329,206	\$6,588,864	\$259,658	4%
3	MEDICAID	\$13,357,895	\$15,344,001	\$1,986,106	15%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$221,308	\$355,009	\$133,701	60%
6	COMMERCIAL INSURANCE	\$5,025,832	\$3,902,643	(\$1,123,189)	-22%
7	NON-GOVERNMENT MANAGED CARE	\$56,978,993	\$51,911,709	(\$5,067,284)	-9%
8	WORKER'S COMPENSATION	\$1,571,219	\$1,596,254	\$25,035	2%
9	SELF- PAY/UNINSURED	\$2,743,452	\$2,080,141	(\$663,311)	-24%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$333,004	\$372,609	\$39,605	12%
	TOTAL OUTPATIENT GROSS REVENUE	\$136,336,748	\$126,871,141	(\$9,465,607)	-7%
	TOTAL ODGGO DEVENUE				
	TOTAL GROSS REVENUE	\$75.007.050	\$70.050.400	(\$5.050.040)	00/
1	MEDICARE TRADITIONAL	\$75,907,358	\$70,053,439	(\$5,853,919)	-8%
2	MEDICARE MANAGED CARE	\$9,603,917	\$9,892,702	\$288,785	3%
3	MEDICAID MANAGER CARE	\$17,571,217	\$19,844,266	\$2,273,049	13%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5		\$261,442	\$409,369	\$147,927	57%
6		\$5,971,385	\$4,888,635	(\$1,082,750)	-18%
7	NON-GOVERNMENT MANAGED CARE	\$68,692,497	\$61,666,285	(\$7,026,212)	-10%
8	WORKER'S COMPENSATION	\$2,330,753	\$2,367,184	\$36,431 (\$873,440)	2%
9	SELF- PAY/UNINSURED	\$3,365,874	\$2,492,764	(\$873,110)	-26%
10	SAGA OTHER	\$0 \$456,886	\$0 \$522,440	\$0 \$65,524	0%
11			\$522,410	•	14%
	TOTAL GROSS REVENUE	\$184,161,329	\$172,137,054	(\$12,024,275)	-7%
II.	NET REVENUE BY PAYER				
- "-	INTERNATION OF TAILS	T			
Α.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$9,895,858	\$8,814,866	(\$1,080,992)	-11%
2	MEDICARE MANAGED CARE	\$1,140,317	\$1,083,090	(\$57,227)	-5%
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
3	MEDICAID	\$1,425,738	\$1,375,687	(\$50,051)	-4%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$37,373	\$20,173	(\$17,200)	-46%
6	COMMERCIAL INSURANCE	\$420,233	\$380,615	(\$39,618)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$5,953,276	\$4,483,648	(\$1,469,628)	-25%
8	WORKER'S COMPENSATION	\$369,766	\$365,991	(\$3,775)	-1%
9	SELF- PAY/UNINSURED	\$41,073	\$47,065	\$5,992	15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$41,920	\$45,792	\$3,872	9%
	TOTAL INPATIENT NET REVENUE	\$19,325,554	\$16,616,927	(\$2,708,627)	-14%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$10,611,477	\$8,945,521	(\$1,665,956)	-16%
2	MEDICARE MANAGED CARE	\$1,444,852	\$1,397,560	(\$47,292)	-3%
3	MEDICAID	\$3,088,780	\$3,609,723	\$520,943	17%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$49,868	\$67,442	\$17,574	35%
6	COMMERCIAL INSURANCE	\$2,653,060	\$2,199,320	(\$453,740)	-17%
7	NON-GOVERNMENT MANAGED CARE	\$31,474,845	\$28,574,879	(\$2,899,966)	-9%
8	WORKER'S COMPENSATION	\$1,033,687	\$1,008,376	(\$25,311)	-2%
9	SELF- PAY/UNINSURED	\$181,039	\$237,266	\$56,227	31%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$77,001	\$87,657	\$10,656	14%
	TOTAL OUTPATIENT NET REVENUE	\$50,614,609	\$46,127,744	(\$4,486,865)	-9%
<u>C.</u>	TOTAL NET REVENUE MEDICARE TRADITIONAL	\$20,507,335	\$17,760,387	(\$2,746,948)	-13%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$20,507,335	\$2,480,650	(\$2,746,946)	-13% -4%
3	MEDICAID	\$4,514,518	\$4,985,410	\$470,892	10%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$87,241	\$87,615	\$374	0%
6	COMMERCIAL INSURANCE			· · · · · · · · · · · · · · · · · · ·	
		\$3,073,293	\$2,579,935	(\$493,358)	-16%
7	NON-GOVERNMENT MANAGED CARE	\$37,428,121	\$33,058,527	(\$4,369,594)	-12%
8	WORKER'S COMPENSATION	\$1,403,453	\$1,374,367	(\$29,086)	-2%
9	SELF- PAY/UNINSURED	\$222,112	\$284,331	\$62,219	28%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$118,921	\$133,449	\$14,528	12%
	TOTAL NET REVENUE	\$69,940,163	\$62,744,671	(\$7,195,492)	-10%
III.	STATISTICS BY PAYER				
111.	STATISTICS BY PATER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	958	918	(40)	-4%
2	MEDICARE MANAGED CARE	125	129	4	3%
3	MEDICAID	188	123	(65)	-35%
4	MEDICAID MANAGED CARE	0	0	0	0%
	CHAMPUS/TRICARE	2	2	0	0%
1 0					
5 6	COMMERCIAL INSURANCE	40	52	12	30%
6	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	40 454	52 356	12 (98)	30% -22%

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
	· ·	FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LINE	DESCRIP HON	AGTORE	AGTOAL	DILLETTOE	DII I EILENGE
9	SELF- PAY/UNINSURED	38	35	(3)	-8%
10	SAGA	0	0	0	0%
11	OTHER	6	6	0	0%
	TOTAL DISCHARGES	1,824	1,636	(188)	-10%
В.	PATIENT DAYS	1,021	1,000	(100)	
1	MEDICARE TRADITIONAL	4,069	4,026	(43)	-1%
2	MEDICARE MANAGED CARE	524	544	20	4%
3	MEDICAID	703	668	(35)	-5%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	3	6	3	100%
6	COMMERCIAL INSURANCE	122	152	30	25%
7	NON-GOVERNMENT MANAGED CARE	1,444	1,138	(306)	-21%
8	WORKER'S COMPENSATION	28	35	7	25%
9	SELF- PAY/UNINSURED	111	117	6	5%
10	SAGA	0	0	0	0%
11	OTHER	13	30	17	131%
	TOTAL PATIENT DAYS	7,017	6,716	(301)	-4%
C.	OUTPATIENT VISITS			()	
1	MEDICARE TRADITIONAL	17,995	17,381	(614)	-3%
2	MEDICARE MANAGED CARE	2,091	2,375	284	14%
3	MEDICAID	9,291	9,842	551	6%
4	MEDICAID MANAGED CARE	0	0	0	0%
5 6	CHAMPUS/TRICARE	123	163	40	33%
7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	2,341 23,582	2,002 21,980	(339) (1,602)	-14% -7%
8	WORKER'S COMPENSATION	672	670	(2)	0%
9	SELF- PAY/UNINSURED	1,805	1,494	(311)	-17%
10	SAGA	0	0	0	0%
11	OTHER	238	224	(14)	-6%
	TOTAL OUTPATIENT VISITS	58,138	56,131	(2,007)	-3%
		,	, -	() /	
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
A.	REVENUE				
1	MEDICARE TRADITIONAL	\$5,596,262	\$5,858,288	\$262,026	5%
2	MEDICARE MANAGED CARE	\$764,282	\$863,832	\$99,550	13%
3	MEDICAID	\$4,743,583	\$4,760,966	\$17,383	0%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$90,541	\$114,114	\$23,573	26%
6	COMMERCIAL INSURANCE	\$1,214,745	\$1,358,514	\$143,769	12%
7	NON-GOVERNMENT MANAGED CARE	\$11,133,229	\$10,485,611	(\$647,618)	-6%
8	WORKER'S COMPENSATION	\$618,950	\$686,606	\$67,656	11%
9	SELF- PAY/UNINSURED	\$1,457,821	\$1,349,274	(\$108,547)	-7%
10	SAGA OTHER	\$0	\$0 \$328,369	\$0	0%
11		\$294,433	Φ328,369	\$33,936	12%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	COE 040 040	¢05 005 574	(6400.070)	00/
	GROSS REVENUE	\$25,913,846	\$25,805,574	(\$108,272)	0%
_	EMERGENCY DEPARTMENT OUTPATIENT NET				
В.	REVENUE MEDICARE TRADITIONAL	C4 040 000	¢4 000 050	645457 0	400/
1	MEDICARE TRADITIONAL	\$1,242,389	\$1,396,959	\$154,570	12%

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
2	MEDICARE MANAGED CARE	\$169,982	\$219,529	\$49,547	29%
3	MEDICAID	\$1,032,127	\$1,011,658	(\$20,469)	-2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$19,896	\$26,196	\$6,300	32%
6	COMMERCIAL INSURANCE	\$694,352	\$722,543	\$28,191	4%
7	NON-GOVERNMENT MANAGED CARE	\$5,980,791	\$5,714,243	(\$266,548)	-4%
8	WORKER'S COMPENSATION	\$377,688	\$411,563	\$33,875	9%
9	SELF- PAY/UNINSURED	\$129,293	\$125,001	(\$4,292)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$42,659	\$45,911	\$3,252	8%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$9,689,177	\$9,673,603	(\$15,574)	0%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	2,891	2,731	(160)	-6%
2	MEDICARE MANAGED CARE	382	408	26	7%
3	MEDICAID	3,402	3,258	(144)	-4%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	52	68	16	31%
6	COMMERCIAL INSURANCE	773	744	(29)	-4%
7	NON-GOVERNMENT MANAGED CARE	6,487	5,897	(590)	-9%
8	WORKER'S COMPENSATION	480	498	18	4%
9	SELF- PAY/UNINSURED	1,015	832	(183)	-18%
10	SAGA	0	0	0	0%
11	OTHER	233	218	(15)	-6%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	15,715	14,654	(1,061)	-7%

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FISCAL YEAR 2014

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMÒÚNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	<u>DIFFERENCE</u>
-	OPERATING EXPENSE BY CATECORY				
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$10,411,751	\$8,258,188	(\$2,153,563)	-21%
2	Physician Salaries	\$352,875	\$268,454	(\$84,421)	-24%
3	Non-Nursing, Non-Physician Salaries	\$18,201,638	\$16,287,946	(\$1,913,692)	-11%
	Total Salaries & Wages	\$28,966,264	\$24,814,588	(\$4,151,676)	-14%
В.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$3,102,852	\$2,189,934	(\$912,918)	-29%
2	Physician Fringe Benefits	\$105,162	\$71,189	(\$33,973)	-32%
3	Non-Nursing, Non-Physician Fringe Benefits	\$5,424,351	\$4,319,289	(\$1,105,062)	-20%
	Total Fringe Benefits	\$8,632,365	\$6,580,412	(\$2,051,953)	-24%
		70,000,000	4 0,000,000	(+=,===,===)	
C.	Contractual Labor Fees:				
1	Nursing Fees	\$0	\$0	\$0	0%
2	Physician Fees	\$6,420,799	\$6,700,193	\$279,394	4%
3	Non-Nursing, Non-Physician Fees	\$82,781	\$3,726	(\$79,055)	-95%
	Total Contractual Labor Fees	\$6,503,580	\$6,703,919	\$200,339	3%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies Medical Supplies	\$5,504,762	\$4.789.622	(\$715,140)	-13%
2	Pharmaceutical Costs	\$4,266,627	\$4,273,986	\$7,359	0%
	Total Medical Supplies and Pharmaceutical Cost	\$9,771,389	\$9,063,608	(\$707,781)	-7%
	Total modical cupplies and Final macounical cost	40,111,000	ψο,ουο,ουο	(\$1.01,101)	1,0
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$1,904,702	\$1,989,583	\$84,881	4%
2	Depreciation-Equipment	\$3,192,397	\$3,141,821	(\$50,576)	-2%
3	Amortization	\$346,081	\$346,080	(\$1)	0%
	Total Depreciation and Amortization	\$5,443,180	\$5,477,484	\$34,304	1%
F.	Bad Debts:				
1	Bad Debts	\$0	\$0	\$0	0%
	Dua Desid	ΨΟ	ΨΟ	ΨΟ	070
G.	Interest Expense:				
1	Interest Expense	\$263,572	\$128,030	(\$135,542)	-51%
	Makana dia a kananana a Orad				
H.	Malpractice Insurance Cost:	\$2,065,738	#2.002.746	\$27,008	1%
ı	Malpractice Insurance Cost	\$2,005,738	\$2,092,746	\$27,008	170
I.	Utilities:				
1	Water	\$107,821	\$88,064	(\$19,757)	-18%
2	Natural Gas	\$196,341	\$239,322	\$42,981	22%
3	Oil	\$58,196	\$77,771	\$19,575	34%
4	Electricity	\$748,381	\$729,281	(\$19,100)	-3%
5	Telephone	\$173,673	\$175,612	\$1,939	1%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$1,284,412	\$1,310,050	\$25,638	2%
J.	Business Expenses:				
1	Accounting Fees	\$137,201	\$190,929	\$53,728	39%
2	Legal Fees	\$105,602	\$28,086	(\$77,516)	-73%
3	Consulting Fees	\$130,770	\$132,799	\$2,029	2%
4	Dues and Membership	\$205,521	\$256,088	\$50,567	25%
5	Equipment Leases	\$664,495	\$600,253	(\$64,242)	-10%
6	Building Leases	\$87,311	\$61,389	(\$25,922)	-30%
7	Repairs and Maintenance	\$1,387,877	\$1,254,223	(\$133,654)	-10%
8	Insurance	\$87,997	\$116,428	\$28,431	32%
9	Travel	\$77,864	\$58,565	(\$19,299)	-25%
10	Conferences	\$0	\$0	\$0	0%

FISCAL YEAR 2014

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
INE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
11	Property Tax	\$19,631	\$14,310	(\$5,321)	-27%
12	General Supplies	\$1,003,226	\$971,257	(\$31,969)	-3%
13	Licenses and Subscriptions	\$29,907	\$53,901	\$23,994	80%
14	Postage and Shipping	\$65,626	\$68,596	\$2,970	5%
15	Advertising	\$756	\$252	(\$504)	-67%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$39,318	\$49,225	\$9,907	25%
18	Computer hardware & small equipment	\$18,814	\$24,251	\$5,437	29%
19	Dietary / Food Services	\$1,035,059	\$1,158,116	\$123,057	129
20	Lab Fees / Red Cross charges	\$384,408	\$364,305	(\$20,103)	-5%
21	Billing & Collection / Bank Fees	\$299,324	\$257,287	(\$42,037)	-14%
22	Recruiting / Employee Education & Recognition	\$100,652	\$104,394	\$3,742	49
23	Laundry / Linen	\$161,905	\$138,643	(\$23,262)	-14%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$1,585,638	\$1,277,799	(\$307,839)	-19%
27	Purchased Services - Non Medical	\$1,857,826	\$1,286,352	(\$571,474)	-31%
28	Other Business Expenses	\$0	\$0	\$0	09
	Total Business Expenses	\$9,486,728	\$8,467,448	(\$1,019,280)	-11%
K.	Other Operating Expense:				
1. 1	Miscellaneous Other Operating Expenses	\$545,071	\$444,913	(\$100,158)	-18%
<u> </u>	Inidedianeeds Caner Operating Expenses	φοποίοι τ	Ψ111,010	(ψ100,100)	107
	Total Operating Expenses - All Expense Categories*	\$72,962,299	\$65,083,198	(\$7,879,101)	-11%
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$17,274,808	\$14,901,835	(\$2,372,973)	-149
2	General Accounting	\$626,738	\$696,704	\$69,966	119
3	Patient Billing & Collection	\$1,024,566	\$1,103,477	\$78,911	89
4	Admitting / Registration Office	\$1,099,102	\$910,361	(\$188,741)	-179
5	Data Processing	\$1,580,088	\$1,456,377	(\$123,711)	-89
6	Communications	\$166,580	\$105,886	(\$60,694)	-36%
7 8	Personnel Public Relations	\$541,838 \$519,649	\$384,413 \$436,957	(\$157,425) (\$82,692)	-29% -16%
9	Purchasing	\$3,538,107	\$3,277,630	(\$260,477)	-16%
10	Dietary and Cafeteria	\$1,279,302	\$1,163,296	(\$260,477)	-7 <i>7</i> -9%
11	Housekeeping	\$914,036	\$818,313	(\$95,723)	-10%
12	Laundry & Linen	\$181,673	\$160,969	(\$20,704)	-11%
13	Operation of Plant	\$1,169,852	\$1,134,487	(\$35,365)	-3%
14	Security	\$500,933	\$440,516	(\$60,417)	-129
15	Repairs and Maintenance	\$1,568,348	\$1,457,507	(\$110,841)	-7%
16	Central Sterile Supply	\$233,574	\$260,068	\$26,494	119
17	Pharmacy Department	\$5,749,835	\$5,407,398	(\$342,437)	-6%
18	Other General Services	\$2,570,896	\$1,955,719	(\$615,177)	-24%
	Total General Services	\$40,539,925	\$36,071,913	(\$4,468,012)	-11%
В.	Professional Services:				
1	Medical Care Administration	\$1,683,454	\$1,287,454	(\$396,000)	-24%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$645,553	\$652,366	\$6,813	19
4	Medical Records	\$905,276	\$809,029	(\$96,247)	-119
5	Social Service	\$18	\$0	(\$18)	-100%
6	Other Professional Services	\$650,349	\$467,167	(\$183,182)	-28%
	Total Professional Services	\$3,884,650	\$3,216,016	(\$668,634)	-17%
C.	Special Services:				

FISCAL YEAR 2014

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
	On anotice a Decem	₽0.240.000	¢4 000 770	(\$22C 00.4)	450/
2	Operating Room Recovery Room	\$2,319,666 \$365,023	\$1,982,772 \$372,933	(\$336,894) \$7,910	-15% 2%
3	Anesthesiology	\$86,835	\$74,437	(\$12,398)	-14%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$1,532,333	\$1,357,948	(\$174,385)	-11%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$1,155,375	\$1,117,967	(\$37,408)	-3%
8	Radioisotopes	\$419,062	\$309,825	(\$109,237)	-26%
9	CT Scan	\$554,672	\$480,022	(\$74,650)	-13%
10	Laboratory	\$2,000,316	\$1,748,004	(\$252,312)	-13%
11	Blood Storing/Processing	\$331,574	\$335,375	\$3,801	1%
12	Cardiology	\$116,074	\$49,996	(\$66,078)	-57%
13	Electrocardiology	\$534,433	\$548,276	\$13,843	3%
14	Electroencephalography	\$0	\$0	\$0	0%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$34,379	\$2,813	(\$31,566)	-92%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$676,310	\$602,208	(\$74,102)	-11%
19	Pulmonary Function	\$302,709	\$0	(\$302,709)	-100%
20	Intravenous Therapy	\$177,408	\$152,833	(\$24,575)	-14%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$838,212	\$589,138	(\$249,074)	-30%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$2,089,736	\$2,132,330	\$42,594	2%
25	MRI PET Scan	\$820,734	\$865,609 \$0	\$44,875	5%
26 27	PET/CT Scan	\$9,142 \$0	\$0 \$0	(\$9,142) \$0	-100% 0%
28	Endoscopy	\$943,352	\$848,445	(\$94,907)	-10%
29	Sleep Center	\$170,112	\$84,981	(\$85,131)	-50%
30	Lithotripsy	\$72,756	\$26,316	(\$46,440)	-64%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0,310	\$0	0%
32	Occupational Therapy / Physical Therapy	\$230,856	\$227,065	(\$3,791)	-2%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$1,197,896	\$910,776	(\$287,120)	-24%
	Total Special Services	\$16,978,965	\$14,820,069	(\$2,158,896)	-13%
			. , ,	(, , , , ,	
D.	Routine Services:				
1	Medical & Surgical Units	\$3,089,032	\$3,112,137	\$23,105	1%
2	Intensive Care Unit	\$1,346,054	\$1,156,613	(\$189,441)	-14%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$1,026,276	\$0	(\$1,026,276)	-100%
7	Newborn Nursery Unit	\$2,503	\$0	(\$2,503)	-100%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$743,355	\$638,345	(\$105,010)	-14%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$5,350,930	\$6,067,827	\$716,897	13%
	Total Routine Services	\$11,558,150	\$10,974,922	(\$583,228)	-5%
	Other Departments:				
E.	Other Departments: Miscellaneous Other Departments	#600	\$278	/#224\	E 40/
1	iwiscellaneous Other Departments	\$609	\$2/8	(\$331)	-54%
	Total Operating Expenses - All Departments*	\$72.062.200	\$65,083,198	(\$7 070 404\	440/
	Total Operating Expenses - All Departments"	\$72,962,299	Φ 00,003,198	(\$7,879,101)	-11%
	*A E The total energting synapses amount all and	must sares with the t	otal anarating a	oncoo omerint co	Donort 1F0
	*A E. The total operating expenses amount above	must agree with the t	otal operating exp	enses amount on i	хероп 130.

	NEW I	MILFORD HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014							
	REPORT 185 - HOSPITAL FINA		ATA ANALYSIS					
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014				
Α.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$81,236,073	\$69,721,620	\$62,064,046				
2	Other Operating Revenue	1,244,665	1,157,159	999,998				
3	Total Operating Revenue	\$82,480,738	\$70,878,779	\$63,064,044				
4	Total Operating Expenses	88,958,809	72,962,299	65,083,198				
5	Income/(Loss) From Operations	(\$6,478,071)	(\$2,083,520)	(\$2,019,154)				
6	Total Non-Operating Revenue	21,958	0	0				
7	Excess/(Deficiency) of Revenue Over Expenses	(\$6,456,113)	(\$2,083,520)	(\$2,019,154)				
В.	Profitability Summary							
1	Hospital Operating Margin	-7.85%	-2.94%	-3.20%				
2	Hospital Non Operating Margin	0.03%	0.00%	0.00%				
3	Hospital Total Margin	-7.83%	-2.94%	-3.20%				
4	Income/(Loss) From Operations	(\$6,478,071)	(\$2,083,520)	(\$2,019,154)				
5	Total Operating Revenue	\$82,480,738	\$70,878,779	\$63,064,044				
6	Total Non-Operating Revenue	\$21,958	\$0	\$0				
7	Total Revenue	\$82,502,696	\$70,878,779	\$63,064,044				
8	Excess/(Deficiency) of Revenue Over Expenses	(\$6,456,113)	(\$2,083,520)	(\$2,019,154)				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	\$12,487,373	\$23,332,942	\$26,205,321				
2	Hospital Total Net Assets	\$20,545,903	\$31,727,632	\$34,128,301				
3	Hospital Change in Total Net Assets	(\$9,843,093)	\$11,181,729	\$2,400,669				
4	Hospital Change in Total Net Assets %	67.6%	54.4%	7.6%				

	NEW MILFORD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014							
	REPORT 185 - HOSPITAL FIN	ANCIAL AND STATISTICAL DA	ATA ANALYSIS					
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2012	FY 2013	<u>FY 2014</u>				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.43	0.39	0.38				
2	Total Operating Expenses	\$88,958,809	\$72,962,299	\$65,083,198				
3	Total Gross Revenue	\$204,381,627	\$184,161,329	\$172,137,054				
4	Total Other Operating Revenue	\$1,244,665	\$874,400	\$1,006,794				
5	Private Payment to Cost Ratio	1.22	1.38	1.43				
6	Total Non-Government Payments	\$48,176,988	\$42,126,979	\$37,297,160				
7	Total Uninsured Payments	\$175,360	\$222,112	\$284,331				
8	Total Non-Government Charges	\$95,705,889	\$80,360,509	\$71,414,868				
9	Total Uninsured Charges	\$4,470,510	\$3,365,874	\$2,492,764				
10	Medicare Payment to Cost Ratio	0.62	0.68	0.67				
11	Total Medicare Payments	\$24,242,071	\$23,092,504	\$20,241,037				
12	Total Medicare Charges	\$90,412,074	\$85,511,275	\$79,946,141				
13	Medicaid Payment to Cost Ratio	0.67	0.65	0.67				
14	Total Medicaid Payments	\$5,018,898	\$4,514,518	\$4,985,410				
15	Total Medicaid Charges	\$17,409,883	\$17,571,217	\$19,844,266				
16	Uncompensated Care Cost	\$1,863,279	\$1,255,840	\$865,107				
17	Charity Care	\$1,181,756	\$624,534	\$515,390				
18	Bad Debts	\$3,125,172	\$2,560,334	\$1,786,094				
19	Total Uncompensated Care	\$4,306,928	\$3,184,868	\$2,301,484				
20	Uncompensated Care % of Total Expenses	2.1%	1.7%	1.3%				

	NEW MILFO	RD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2012	FY 2013	FY 2014					
21	Total Operating Expenses	\$88,958,809	\$72,962,299	\$65,083,198					
E.	Liquidity Measures Summary								
1	Current Ratio	1	1	1					
2	Total Current Assets	\$14,864,692	\$11,428,830	\$10,514,566					
3	Total Current Liabilities	\$14,759,903	\$13,783,340	\$13,048,375					
4	Days Cash on Hand	16	12	11					
5	Cash and Cash Equivalents	\$3,717,748	\$2,221,385	\$1,731,840					
6	Short Term Investments	0	0	0					
7	Total Cash and Short Term Investments	\$3,717,748	\$2,221,385	\$1,731,840					
8	Total Operating Expenses	\$88,958,809	\$72,962,299	\$65,083,198					
9	Depreciation Expense	\$5,511,455	\$5,443,180	\$5,477,484					
10	Operating Expenses less Depreciation Expense	\$83,447,354	\$67,519,119	\$59,605,714					
11	Days Revenue in Patient Accounts Receivable	28	28	24					
12	Net Patient Accounts Receivable	\$8,601,320	\$7,314,799	\$6,782,651					
13	Due From Third Party Payers	\$0	\$0	\$0					
14	Due To Third Party Payers	\$2,461,714	\$1,973,652	\$2,776,797					
4.5	Total Net Patient Accounts Receivable and Third Party Payer	#0.400.000	# F 044 447	# 4.005.05					
15 16	Activity Total Net Patient Revenue	\$6,139,606 \$81,236,073	\$5,341,147 \$69,721,620	\$4,005,854 \$62,064,046					
4=	A Barrier Barrier	2.0							
17	Average Payment Period	65	75	80					
18	Total Current Liabilities	\$14,759,903	\$13,783,340	\$13,048,375					
19	Total Operating Expenses	\$88,958,809	\$72,962,299	\$65,083,198					
20	Depreciation Expense	\$5,511,455	\$5,443,180	\$5,477,48					

	TWELVE MONTH								
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2014								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
	(0)	(0)	40	(5)					
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL					
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014					
LINE	DESCRIPTION	<u> </u>	<u> F1 2013</u>	<u>F1 2014</u>					
21	Total Operating Expenses less Depreciation Expense	\$83,447,354	\$67,519,119	\$59,605,714					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	31.0	51.8	51.1					
2	Total Net Assets	\$20,545,903	\$31,727,632	\$34,128,301					
3	Total Assets	\$66,374,764	\$61,269,930	\$66,788,792					
4	Cash Flow to Total Debt Ratio	(4.8)	20.7	24.5					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$6,456,113)	(\$2,083,520)	(\$2,019,154)					
6	Depreciation Expense	\$5,511,455	\$5,443,180	\$5,477,484					
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$944,658)	\$3,359,660	\$3,458,330					
8	Total Current Liabilities	\$14,759,903	\$13,783,340	\$13,048,375					
9	Total Long Term Debt	\$4,829,283	\$2,476,284	\$1,082,488					
10	Total Current Liabilities and Total Long Term Debt	\$19,589,186	\$16,259,624	\$14,130,863					
11	Long Term Debt to Capitalization Ratio	19.0	7.2	3.1					
12	Total Long Term Debt	\$4,829,283	\$2,476,284	\$1,082,488					
13	Total Net Assets	\$20,545,903	\$31,727,632	\$34,128,301					
14	Total Long Term Debt and Total Net Assets	\$25,375,186	\$34,203,916	\$35,210,789					
15	Debt Service Coverage Ratio	(0.7)	2.0	2.4					
16	Excess Revenues over Expenses	(6,456,113)	(\$2,083,520)	(\$2,019,154)					
17	Interest Expense	391,263	\$263,572	\$128,030					
18	Depreciation and Amortization Expense	5,511,455	\$5,443,180	\$5,477,484					
19	Principal Payments	415,636	\$1,508,855	\$1,339,233					
G.	Other Financial Ratios								

	NEW MILFO	ORD HOSPITAL						
	TWELVE MONTH	HS ACTUAL FILING						
	FISCAL YEAR 2014							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014				
20	Average Age of Plant	13.7	11.7	12.7				
21	Accumulated Depreciation	75,751,426	63,868,519	69,346,293				
22	Depreciation and Amortization Expense	5,511,455	5,443,180	5,477,484				
Н.	Utilization Measures Summary							
1	Patient Days	8,537	7,017	6,716				
2	Discharges	2,288	1,824	1,636				
3	ALOS	3.7	3.8	4.1				
4	Staffed Beds	27	22	19				
5	Available Beds	21	95	85				
		05						
6	Licensed Beds	95	85	85				
7	Occupancy of Staffed Beds	86.6%	87.4%	96.8%				
8	Occupancy of Available Beds	24.6%	20.2%	21.6%				
9	Full Time Equivalent Employees	420.3	362.2	307.0				
ı.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	44.6%	41.8%	40.0%				
2	Medicare Gross Revenue Payer Mix Percentage	44.2%	46.4%	46.4%				
3	Medicaid Gross Revenue Payer Mix Percentage	8.5%	9.5%	11.5%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.3%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.2%	1.8%	1.4%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.2%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$91,235,379	\$76,994,635	\$68,922,104				
9	Medicare Gross Revenue (Charges)	\$90,412,074	\$85,511,275	\$79,946,141				
10	Medicaid Gross Revenue (Charges)	\$17,409,883	\$17,571,217	\$19,844,266				
11	Other Medical Assistance Gross Revenue (Charges)	\$460,720	\$456,886	\$522,410				
12	Uninsured Gross Revenue (Charges)	\$4,470,510	\$3,365,874	\$2,492,764				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$393,061	\$261,442	\$409,369				
14	Total Gross Revenue (Charges)	\$204,381,627	\$184,161,329	\$172,137,054				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	61.8%	59.9%	59.0%				
2	Medicare Net Revenue Payer Mix Percentage	31.2%	33.0%	32.3%				

	NEW MILFOR	RD HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
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(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2012	FY 2013	FY 2014				
3	Medicaid Net Revenue Payer Mix Percentage	6.5%	6.5%	7.9%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.2%	0.2%	0.2%				
5	Uninsured Net Revenue Payer Mix Percentage	0.2%	0.3%	0.5%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
	Non-Covernment Net Bourse (Bourse)	# 40.004.000	¢44.004.007	Ф07 040 000				
8	Non-Government Net Revenue (Payments)	\$48,001,628	\$41,904,867	\$37,012,829				
9	Medicare Net Revenue (Payments)	\$24,242,071	\$23,092,504	\$20,241,037				
10	Medicaid Net Revenue (Payments)	\$5,018,898	\$4,514,518	\$4,985,410				
11	Other Medical Assistance Net Revenue (Payments)	\$127,188	\$118,921	\$133,449				
12	Uninsured Net Revenue (Payments)	\$175,360	\$222,112	\$284,331				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$101,107	\$87,241	\$87,615				
14	Total Net Revenue (Payments)	\$77,666,252	\$69,940,163	\$62,744,671				
K.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	888	545	458				
2	Medicare	1,118	1,083	1,047				
3	Medical Assistance	273	194	129				
4	Medicaid	265	188	123				
5	Other Medical Assistance	8	6	6				
6	CHAMPUS / TRICARE	9	2	2				
7	Uninsured (Included In Non-Government)	54	38	35				
8	Total	2,288	1,824	1,636				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.03840	1.30240	1.37130				
2	Medicare	1.33900	1.33120	1.31880				
3	Medical Assistance	0.77646	0.99578	1.18940				
4	Medicaid	0.77720	0.99210	1.18940				
5	Other Medical Assistance	0.75200	1.11100	1.18940				
6	CHAMPUS / TRICARE	0.77890	1.16000	1.59000				
7	Uninsured (Included In Non-Government)	0.87460	1.01380	1.10250				
8	Total Case Mix Index	1.15301	1.28673	1.32363				
М.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	2,050	2,135	1,984				
2	Emergency Room - Treated and Discharged	16,366	15,715	14,654				
3	Total Emergency Room Visits	18,416	17,850	16,638				

REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$486,703	\$198,795	(\$287,908)	-59%
2	Inpatient Payments	\$169,479	\$65,171	(\$104,308)	-62%
3	Outpatient Charges	\$1,693,895	\$548,131	(\$1,145,764)	-68%
4	Outpatient Payments	\$386,688	\$116,263	(\$270,425)	-70%
5	Discharges	20	8	(12)	-60%
6	Patient Days	80	42	(38)	-48%
7	Outpatient Visits (Excludes ED Visits)	376	138	(238)	-63%
8	Emergency Department Outpatient Visits	67	26	(41)	-61%
9	Emergency Department Inpatient Admissions	18	8	(10)	-56%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,180,598	\$746,926	(\$1,433,672)	-66%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$556,167	\$181,434	(\$374,733)	-67%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	2	0	(2)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$531,312	\$288,862	(\$242,450)	-46%
2	Inpatient Payments	\$185,013	\$94,697	(\$90,316)	-49%
3	Outpatient Charges	\$1,036,106	\$1,134,691	\$98,585	10%
4	Outpatient Payments	\$236,526	\$240,679	\$4,153	2%
5	Discharges	21	12	(9)	-43%
6	Patient Days	81	35	(46)	-57%
7	Outpatient Visits (Excludes ED Visits)	233	342	109	47%
8	Emergency Department Outpatient Visits	61	69	8	13%
9	Emergency Department Inpatient Admissions	18	10	(8)	-44%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,567,418	\$1,423,553	(\$143,865)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$421,539	\$335,376	(\$86,163)	-20%

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT	00	Φ0	Φ0	00/
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0% 0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$141,333	\$33,707	(\$107,626)	-76%
2	Inpatient Payments	\$49,215	\$11,050	(\$38,165)	-78%
3	Outpatient Charges	\$68,085	\$34,610	(\$33,475)	-49%
4	Outpatient Payments	\$15,542	\$7,341	(\$8,201)	-53%
5	Discharges	3	2	(1)	-33%
6	Patient Days	62	6	(56)	-90%
7	Outpatient Visits (Excludes ED Visits)	4	3	(1)	-25%
8	Emergency Department Outpatient Visits	23	17	(6)	-26%
9	Emergency Department Inpatient Admissions	3	2	(1)	-33%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$209,418	\$68,317	(\$141,101)	-67%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$64,757	\$18,391	(\$46,366)	-72%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANT	ACE			
<u>г.</u> 1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
	Discharges	0	φ <u>υ</u>	φ <u>υ</u>	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
J	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INI ATILITI & OUT ATILITI FATIVLINIS	φ0	Ψυ	φυ	U /0

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
\-\(\frac{1}{2}\)	(-)	FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$1,714,344	\$1,817,857	\$103,513	6%
2	Inpatient Payments	\$596,967	\$595,944	(\$1,023)	0%
3	Outpatient Charges	\$2,426,419	\$2,575,812	\$149,393	6%
4	Outpatient Payments	\$553,911	\$546,354	(\$7,557)	-1%
5	Discharges	61	65	4	7%
6	Patient Days	246	301	55	22%
7	Outpatient Visits (Excludes ED Visits)	791	803	12	2%
8	Emergency Department Outpatient Visits	125	141	16	13%
9	Emergency Department Inpatient Admissions	51	60	9	18%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,140,763	\$4,393,669	\$252,906	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,150,878	\$1,142,298	(\$8,580)	-1%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$320	\$5,528	\$5,208	1628%
4	Outpatient Payments	\$73	\$1,173	\$1,100	1507%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	1	0	(1)	-100%
8	Emergency Department Outpatient Visits	2	6	4	200%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$320	\$5,528	\$5,208	1628%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$73	\$1,173	\$1,100	1507%
	AETNA				
I. 1	Inpatient Charges	\$365,376	\$964,617	\$599,241	164%
2	Inpatient Charges Inpatient Payments	\$305,376	\$964,617	\$188,997	149%
3	Outpatient Charges	\$1,066,664	\$316,228	\$1,196,151	149%
4	Outpatient Charges Outpatient Payments	\$1,066,664	\$479,964	\$1,196,151	97%
5	Discharges	\$243,502 18	\$479,964	φ230,462 24	133%
6	Patient Days	51	160	109	214%
7	Outpatient Visits (Excludes ED Visits)	297	675	378	127%
8	Emergency Department Outpatient Visits	97	145	48	49%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	15	40	25	167%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,432,040	\$3,227,432	\$1,795,392	125%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$370,733	\$796,192	\$425,459	115%
-	TOTAL INFATILITY & OUTPATIENT PATMENTS	कुउर ७,१ उउ	ψι 30, 132	Ψ423,439	113%

REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA			/*	
1	Inpatient Charges	\$35,643	\$0	(\$35,643)	-100%
2	Inpatient Payments	\$12,412	\$0	(\$12,412)	-100%
3	Outpatient Charges	\$37,717	\$27,277	(\$10,440)	-28%
4	Outpatient Payments	\$8,610	\$5,786	(\$2,824)	-33%
5	Discharges	2	0	(2)	-100%
6	Patient Days	4	0	(4)	-100%
7	Outpatient Visits (Excludes ED Visits)	7	6	(1)	-14%
8	Emergency Department Outpatient Visits	5	4	(1)	-20%
9	Emergency Department Inpatient Admissions	2	0	(2)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$73,360	\$27,277	(\$46,083)	-63%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$21,022	\$5,786	(\$15,236)	-72%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
<u>L.</u>	UNICARE LIFE & HEALTH INSURANCE	•			
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN				l
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N	EVEDOADE				
N.	EVERCARE Innetient Charges	\$0	\$0	\$0	0%
	Inpatient Charges				
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICARE MANAGED CARE				
22,					
	TOTAL INPATIENT CHARGES	\$3,274,711	\$3,303,838	\$29,127	1%
	TOTAL INPATIENT PAYMENTS	\$1,140,317	\$1,083,090	(\$57,227)	
	TOTAL OUTPATIENT CHARGES	\$6,329,206	\$6,588,864	\$259,658	4%
	TOTAL OUTPATIENT PAYMENTS	\$1,444,852	\$1,397,560	(\$47,292)	-3%
	TOTAL DISCHARGES	125	129	4	3%
	TOTAL PATIENT DAYS	524	544	20	4%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,709	1,967	258	15%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	.,. 00	.,501		1070
	VISITS	382	408	26	7%
	TOTAL EMERGENCY DEPARTMENT INPATIENT	332	.30		1,0
	ADMISSIONS	107	120	13	12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,603,917	\$9,892,702	\$288,785	
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,585,169	\$2,480,650	(\$104,519)	

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REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	· ·	FY 2013	FY 2014	AMOUNT	` '
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
Α.	CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
_					
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
_					
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
, ,		FY 2013	FY 2014	AMÒÚNT	, ,
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
_					
D.	OTHER MEDICAID MANAGED CARE	0.0	40	Φ0	201
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
_	WELLOADE OF COMMENTALITY				
E.	WELLCARE OF CONNECTICUT	00	40	Φ0	201
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Orlanges Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		Ψ	Ψ	Ψ	070
Н.	AETNA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
			_		
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED		_	_	
	VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT	_	_	_	
	OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT	_	_	_	
	INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

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WESTERN CONNECTICUT HEALTH NETWORK INC.(FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.) TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) (6) (5) FY 2013 FY 2014 AMOUNT LINE DESCRIPTION **ACTUAL ACTUAL** DIFFERENCE **DIFFERENCE ASSETS** Α. **Current Assets:** Cash and Cash Equivalents \$71,777,507 \$144,314,483 \$72,536,976 101% Short Term Investments \$0 \$14,004,464 \$14,004,464 0% Accounts Receivable (Less: Allowance for 68% Doubtful Accounts) \$76.374.995 \$128.633.349 \$52,258,354 Current Assets Whose Use is Limited for Current Liabilities \$6,189,827 \$9,863,637 \$3,673,810 59% 5 Due From Affiliates \$0 \$0 \$0 0% \$0 6 Due From Third Party Payers \$0 \$0 0% 7 \$3,200,631 28% Inventories of Supplies \$11,258,609 \$14,459,240 8 Prepaid Expenses \$15,085,296 \$30,762,442 \$15,677,146 104% Other Current Assets 20% \$13,627,769 \$16,375,353 \$2,747,584 **Total Current Assets** 84% \$194,314,003 \$358,412,968 \$164,098,965 **Noncurrent Assets Whose Use is Limited:** В. Held by Trustee \$7.593.627 \$15.765.862 \$8,172,235 108% Board Designated for Capital Acquisition 0% \$0 \$0 \$0 Funds Held in Escrow 3 \$0 \$0 \$0 0% Other Noncurrent Assets Whose Use is Limited \$102,677,901 \$117,033,285 \$14,355,384 14% **Total Noncurrent Assets Whose Use is** Limited: 20% \$110,271,528 \$132,799,147 \$22,527,619 Interest in Net Assets of Foundation \$0 \$0 \$0 0% Long Term Investments \$269.214.330 \$433.150.793 \$163.936.463 61% Other Noncurrent Assets \$49,578,607 9% \$53,835,196 \$4,256,589 C. **Net Fixed Assets:** Property, Plant and Equipment \$647,668,638 104% \$1,318,420,986 \$670,752,348 Less: Accumulated Depreciation \$408,828,028 \$775,229,849 \$366,401,821 \$1 Property, Plant and Equipment, Net \$238,840,610 \$543,191,137 \$304,350,527 127% -2% Construction in Progress \$110,954,585 \$108,748,595 (\$2,205,990)**Total Net Fixed Assets** 86% \$349,795,195 \$651,939,732 \$302,144,537 **Total Assets** \$973,173,663 \$1,630,137,836 \$656,964,173 68%

WESTERN CONNECTICUT HEALTH NETWORK INC.(FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.) TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) (5) (6) FY 2013 FY 2014 AMOUNT **DIFFERENCE** LINE DESCRIPTION **ACTUAL ACTUAL** DIFFERENCE LIABILITIES AND NET ASSETS **Current Liabilities:** A. 1 Accounts Payable and Accrued Expenses \$41,394,472 \$78.566.464 \$37,171,992 90% Salaries, Wages and Payroll Taxes 54% 2 \$44,842,213 \$69,089,102 \$24,246,889 3 Due To Third Party Payers \$10.798.195 \$53,635,921 \$42,837,726 397% \$0 4 Due To Affiliates \$0 0% \$0 \$2,880,000 \$11,964,141 \$9,084,141 315% 5 Current Portion of Long Term Debt Current Portion of Notes Pavable \$0 0% \$0 7 Other Current Liabilities \$0 \$0 \$0 0% **Total Current Liabilities** \$99,914,880 \$213,255,628 \$113,340,748 113% В. Long Term Debt: Bonds Payable (Net of Current Portion) \$0 \$0 \$0 0% Notes Payable (Net of Current Portion) \$246,700,000 \$363,726,412 \$117,026,412 47% **Total Long Term Debt** \$246,700,000 \$363,726,412 \$117,026,412 47% 112% 3 Accrued Pension Liability \$79,978,708 \$169,569,725 \$89,591,017 Other Long Term Liabilities \$46,380,935 \$86,031,950 \$39,651,015 85% 66% **Total Long Term Liabilities** \$373,059,643 \$619,328,087 \$246,268,444 Interest in Net Assets of Affiliates or Joint 5 Ventures \$0 \$0 \$0 0% C. Net Assets: Unrestricted Net Assets or Equity \$404.480.146 \$661.351.254 \$256.871.108 64% Temporarily Restricted Net Assets 49% \$62,336,151 \$92,944,545 \$30,608,394 Permanently Restricted Net Assets \$33,382,843 \$43,258,322 \$9,875,479 30% **Total Net Assets** \$500,199,140 \$797,554,121 \$297,354,981 59% **Total Liabilities and Net Assets** \$973,173,663 \$1,630,137,836 \$656,964,173 68%

A. Operating Revenue \$1,675,013,713 \$2,462,700,883 \$787,687,170 2 Less: Allowances \$943,746,674 \$1,433,142,911 \$489,396,237 3 Less: Charity Care \$15,612,154 \$27,520,752 \$11,908,598 \$1,625,013,732 \$2,625,010,732,207,732 \$11,908,598 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,382,335 \$1,022,037,320 \$286,330,862 \$961,369,530 \$267,738,668 \$1,022,013,364,145 \$25,099,816 \$11,735,671 \$1,024 Assets Released from Restrictions \$5,514,055 \$7,155,684 \$1,641,629 \$1,641,641,641,641,641,641,641,641,641,64		WESTERN CONNECTICUT HEALTH NETWORK II	NC.(FORMERLY WE	ESTERN CONNECT	ICUT HEALTHCAR	E, INC.)			
Care		TWELVE !	MONTHS ACTUAL F	FILING					
(1) (2) (3) (4) (5) (6) (6)									
FY 2013									
Description	(1)	(2)							
Total Gross Patient Revenue	LINE	<u>DESCRIPTION</u>		<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE			
Total Gross Patient Revenue									
Less: Allowances	Α.	Operating Revenue:							
Less: Charity Care				. , , , ,		47%			
Less: Other Deductions						52%			
Total Net Patient Revenue		•		\$27,520,752		76%			
Section Sect	4				·	0%			
Net Patient Service Revenue less provision for bad debts		Total Net Patient Revenue	\$715,654,985		\$286,382,335	40%			
Debts \$693,630,862 \$961,369,530 \$267,738,668	5		\$22,024,123	\$40,667,790	\$18,643,667	85%			
Total Operating Revenue \$712,509,062 \$993,625,030 \$281,115,968 B. Operating Expenses: 1 Salaries and Wages \$347,618,831 \$469,826,938 \$122,208,107 2 Fringe Benefits \$81,025,978 \$104,7721,012 \$23,695,034 3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,161,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 11 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,1116,608)		-	\$693,630,862	\$961,369,530	\$267,738,668	39%			
Total Operating Revenue \$712,509,062 \$993,625,030 \$281,115,968	6	Other Operating Revenue	\$13,364,145	\$25,099,816	\$11,735,671	88%			
B. Operating Expenses: \$347,618,831 \$469,826,938 \$122,208,107 2 Fringe Benefitis \$81,025,978 \$104,721,012 \$23,695,034 3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: \$7,054,057 \$5,772,965 (\$1,281,092) 1 Income from Investments \$7,054,057 \$5,517,373 \$4,863	7	Net Assets Released from Restrictions	\$5,514,055	\$7,155,684	\$1,641,629	30%			
1 Salaries and Wages \$347,618,831 \$469,826,938 \$122,208,107 2 Fringe Benefits \$81,025,978 \$104,721,012 \$23,695,034 3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 <t< td=""><td></td><td>Total Operating Revenue</td><td>\$712,509,062</td><td>\$993,625,030</td><td>\$281,115,968</td><td>39%</td></t<>		Total Operating Revenue	\$712,509,062	\$993,625,030	\$281,115,968	39%			
1 Salaries and Wages \$347,618,831 \$469,826,938 \$122,208,107 2 Fringe Benefits \$81,025,978 \$104,721,012 \$23,695,034 3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 <t< td=""><td></td><td>Operation Funerces</td><td></td><td></td><td></td><td></td></t<>		Operation Funerces							
2 Fringe Benefits \$81,025,978 \$104,721,012 \$23,695,034 3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Revenue \$10,485,983 \$317,883,554			¢247 610 021	¢460 926 029	¢122 208 107	250/			
3 Physicians Fees \$6,963,831 \$16,270,068 \$9,306,237 4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments		<u> </u>				35%			
4 Supplies and Drugs \$183,503,640 \$218,534,365 \$35,030,725 5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: \$1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 10 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency)						29%			
5 Depreciation and Amortization \$37,300,840 \$53,445,138 \$16,144,298 6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 11 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses		•				134%			
6 Bad Debts \$0 \$0 \$0 7 Interest Expense \$4,067,031 \$6,326,466 \$2,259,435 8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: \$7,054,057 \$5,772,965 (\$1,281,092) 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 11 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments \$0 \$0 <t< td=""><td></td><td></td><td></td><td></td><td></td><td>19%</td></t<>						19%			
Interest Expense						43%			
8 Malpractice Insurance Cost \$15,709,626 \$20,861,003 \$5,151,377 9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 10 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: \$0 \$0 \$0 All Other Adjustments \$0 \$0 \$0 Total Other Adjustments \$0 \$1,116,608 (\$1,116,608) Total Other Adjustments \$0 \$1,116,608 (\$1,116,608)			·	·	·	0%			
9 Other Operating Expenses \$13,082,673 \$71,190,612 \$58,107,939 Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152 Income/(Loss) From Operations \$23,236,612 \$32,449,428 \$9,212,816 C. Non-Operating Revenue: 1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 11 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)				. , ,		56%			
Total Operating Expenses \$689,272,450 \$961,175,602 \$271,903,152						33%			
Income/(Loss) From Operations	9	<u> </u>	, , ,			444%			
C. Non-Operating Revenue: \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 11 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 \$0 \$0 Total Other Adjustments \$0 \$1,116,608 (\$1,116,608) Total Other Adjustments \$0 \$1,116,608 (\$1,116,608)		Total Operating Expenses	\$689,272,450	\$961,175,602	\$271,903,152	39%			
1 Income from Investments \$7,054,057 \$5,772,965 (\$1,281,092) 2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 10 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		Income/(Loss) From Operations	\$23,236,612	\$32,449,428	\$9,212,816	40%			
2 Gifts, Contributions and Donations \$653,873 \$5,517,373 \$4,863,500 3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 10 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)	C.	Non-Operating Revenue:							
3 Other Non-Operating Gains/(Losses) \$2,778,053 \$306,593,216 \$303,815,163 10 Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571	1	Income from Investments	\$7,054,057	\$5,772,965	(\$1,281,092)	-18%			
Total Non-Operating Revenue \$10,485,983 \$317,883,554 \$307,397,571 Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: \$0 \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)	2	Gifts, Contributions and Donations	\$653,873	\$5,517,373	\$4,863,500	744%			
Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)	3	Other Non-Operating Gains/(Losses)	\$2,778,053	\$306,593,216	\$303,815,163	10936%			
(Before Other Adjustments) \$33,722,595 \$350,332,982 \$316,610,387 Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		Total Non-Operating Revenue	\$10,485,983	\$317,883,554	\$307,397,571	2932%			
Other Adjustments: \$0 \$0 \$0 Unrealized Gains/(Losses) \$0 \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		Excess/(Deficiency) of Revenue Over Expenses							
Unrealized Gains/(Losses) \$0 \$0 All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		(Before Other Adjustments)	\$33,722,595	\$350,332,982	\$316,610,387	939%			
All Other Adjustments \$0 (\$1,116,608) (\$1,116,608) Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		Other Adjustments:							
Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		Unrealized Gains/(Losses)	\$0	\$0	\$0	0%			
Total Other Adjustments \$0 (\$1,116,608) (\$1,116,608)		All Other Adjustments	\$0	(\$1,116,608)	(\$1,116,608)	0%			
			\$0			0%			
Excess/(Deficiency) of Revenue Over Expenses \$33,722,595 \$349,216,374 \$315,493,779		Execution of Powers Over Every	\$22.700 EGE	¢240.040.074	\$24E 402 770	936%			

WESTERN CONNECTICUT HEALTH NETWORK INC.(FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.) TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012		<u>FY 2014</u>
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$736,921,369	\$693,630,862	\$961,369,530
2	Other Operating Revenue	29,907,285	18,878,200	32,255,500
3	Total Operating Revenue	\$766,828,654	\$712,509,062	\$993,625,030
4	Total Operating Expenses	748,965,294	689,272,450	961,175,602
5	Income/(Loss) From Operations	\$17,863,360	\$23,236,612	\$32,449,428
6	Total Non-Operating Revenue	24,649,093	10,485,983	316,766,946
7	Excess/(Deficiency) of Revenue Over Expenses	\$42,512,453	\$33,722,595	\$349,216,374
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	2.26%	3.21%	2.48%
2	Parent Corporation Non-Operating Margin	3.11%	1.45%	24.17%
3	Parent Corporation Total Margin	5.37%	4.66%	26.65%
4	Income/(Loss) From Operations	\$17,863,360	\$23,236,612	\$32,449,428
5	Total Operating Revenue	\$766,828,654	\$712,509,062	\$993,625,030
6	Total Non-Operating Revenue	\$24,649,093	\$10,485,983	\$316,766,946
7	Total Revenue	\$791,477,747	\$722,995,045	\$1,310,391,976
8	Excess/(Deficiency) of Revenue Over Expenses	\$42,512,453	\$33,722,595	\$349,216,374
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$277,089,185	\$404,480,146	\$661,351,254
2	Parent Corporation Total Net Assets	\$343,874,581	\$500,199,140	\$797,554,121
3	Parent Corporation Change in Total Net Assets	(\$4,529,861)	\$156,324,559	\$297,354,981
4	Parent Corporation Change in Total Net Assets %	98.7%	45.5%	59.4%

WESTERN CONNECTICUT HEALTH NETWORK INC.(FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.) TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL	
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014	
D.	Liquidity Measures Summary				
1	Current Ratio	2.26	1.94	1.68	
2	Total Current Assets	\$187,490,183	\$194,314,003	\$358,412,968	
3	Total Current Liabilities	\$82,893,922	\$99,914,880	\$213,255,628	
4	Days Cash on Hand	38	40	64	
5	Cash and Cash Equivalents	\$74,083,960	\$71,777,507	\$144,314,483	
6	Short Term Investments	\$0	\$0	\$14,004,464	
7	Total Cash and Short Term Investments	\$74,083,960	\$71,777,507	\$158,318,947	
8	Total Operating Expenses	\$748,965,294	\$689,272,450	\$961,175,602	
9	Depreciation Expense	\$39,029,252	\$37,300,840	\$53,445,138	
10	Operating Expenses less Depreciation Expense	\$709,936,042	\$651,971,610	\$907,730,464	
11	Days Revenue in Patient Accounts Receivable	33	35	28	
12	Net Patient Accounts Receivable	\$ 79,495,132	\$ 76,374,995	\$ 128,633,349	
13	Due From Third Party Payers	\$0	\$0	\$0	
14	Due To Third Party Payers	\$12,492,073	\$10,798,195	\$53,635,921	
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 67,003,059	\$ 65,576,800	\$ 74,997,428	
16	Total Net Patient Revenue	\$736,921,369	\$693,630,862	\$961,369,530	
17	Average Payment Period	43	56	86	
18	Total Current Liabilities	\$82,893,922	\$99,914,880	\$213,255,628	
19	Total Operating Expenses	\$748,965,294	\$689,272,450	\$961,175,602	
20	Depreciation Expense	\$39,029,252	\$37,300,840	\$53,445,138	
20	Total Operating Expenses less Depreciation Expense	\$709,936,042	\$651,971,610	\$907,730,464	

Total Long Term Debt and Total Net Assets

WESTERN CONNECTICUT HEALTH NETWORK INC.(FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.) **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) ACTUAL **ACTUAL ACTUAL** LINE DESCRIPTION FY 2012 FY 2013 FY 2014 **Solvency Measures Summary** 37.7 48.9 **Equity Financing Ratio** 51.4 1 Total Net Assets \$343,874,581 \$500,199,140 \$797,554,121 \$973,173,663 Total Assets \$911,969,433 \$1,630,137,836 **Cash Flow to Total Debt Ratio** 24.5 20.5 69.8 Excess/(Deficiency) of Revenues Over Expenses \$42,512,453 \$33,722,595 \$349,216,374 6 Depreciation Expense \$39,029,252 \$37,300,840 \$53,445,138 Excess of Revenues Over Expenses and Depreciation Expense \$81,541,705 \$71,023,435 \$402,661,512 \$213,255,628 Total Current Liabilities \$82,893,922 \$99,914,880 Total Long Term Debt \$250,593,765 \$246,700,000 \$363,726,412 10 Total Current Liabilities and Total Long Term Debt \$333,487,687 \$576,982,040 \$346,614,880 **Long Term Debt to Capitalization Ratio** 42.2 33.0 31.3 11 \$363,726,412 12 Total Long Term Debt \$250,593,765 \$246,700,000 Total Net Assets \$343,874,581 \$500,199,140 \$797,554,121

\$594,468,346

\$746,899,140

\$1,161,280,533

				NEW	MILFORD HOSP	ITAL		
	TWELVE MONTHS ACTUAL FILING							
			REPORT 40	FISCAL YEAR 2014 REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT				
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6) OCCUPANCY	(7) OCCUPANCY
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION		CU/CCU # PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	5,836	1,636	1,621	16	69	99.9%	23.2%
2	ICU/CCU (Excludes Neonatal ICU)	880	121	0	3	8	80.4%	30.1%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0		0		0	0.0%	0.0%
	TOTAL PSYCHIATRIC	0	_	0	-	0	0.0%	0.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
_								
6	Maternity	0	0	0	0	8	0.0%	0.0%
7	Newborn	0	0	0	0	0	0.0%	0.0%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	6,716	1,636	1,621	19	85	96.8%	21.6%
	TOTAL INPATIENT BED UTILIZATION	6,716	1,636	1,621	19	85	96.8%	21.6%
	TOTAL INPATIENT REPORTED YEAR	6,716	1,636	1,621	19	85	96.8%	21.6%
	TOTAL INPATIENT PRIOR YEAR	7,017	1,824	1,829	22	95	87.4%	20.2%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-301	-188	-208	-3	-10	9.5%	1.4%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-4%	-10%	-11%	-14%	-11%	11%	7%
	Total Licensed Beds and Bassinets	85						
(A) T	his number may not exceed the number of availa	ble beds for eac	h department or in t	otal.				
Note	: Total discharges do not include ICU/CCU patier	nts.						
	pulled							

	NEV	W MILFORD HOSPITA	AL								
		MONTHS ACTUAL	FILING								
FISCAL YEAR 2014											
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTH	IER SERVICES UTIL	IZATION AND FTES							
(1)	(2)	(3)	(4)	(5)	(6)						
(1)	(2)	(3)	(4)	(5)	(6)						
		ACTUAL	ACTUAL	AMOUNT	%						
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE						
	CT Scans (A)										
	Inpatient Scans	710	703	-7	-1%						
	Outpatient Scans (Excluding Emergency Department Scans)	2,528	2,571	43	2%						
	Emergency Department Scans	1,586	1,597	11	1%						
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%						
	Total CT Scans	4,824	4,871	47	1%						
	MRI Scans (A)										
1	Inpatient Scans Outputient Scans (Evaluding Emergency Department	117	119	2	2%						
2	Outpatient Scans (Excluding Emergency Department Scans)	2,720	2,511	-209	-8%						
	Emergency Department Scans	2,720	2,511	7	47%						
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%						
	Total MRI Scans	2,852	2,652	-200	-7%						
	PET Scans (A)										
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	0%						
	Scans)	0	0	0	0%						
	Emergency Department Scans	0	0	0	0%						
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%						
	Total PET Scans	0	0	0	0%						
	PET/CT Scans (A)		2		00/						
	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	0%						
	Scans)	7	0	-7	-100%						
3	Emergency Department Scans	0	0	0	0%						
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%						
	Total PET/CT Scans	7	0	-7	-100%						
	(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.										
	volume of each of these types of scans from the primary provider of the scans.										
E.	Linear Accelerator Procedures										
1	Inpatient Procedures	0	0	0	0%						
2	Outpatient Procedures	0	0		0%						
	Total Linear Accelerator Procedures	0	0	0	0%						
-	Cardiae Catheterization Procedures										
F.	<u>Cardiac Catheterization Procedures</u> Inpatient Procedures	0	0	0	0%						
	Outpatient Procedures	0	0	0	0%						
	Total Cardiac Catheterization Procedures	0	0		0%						
	Cardiac Angioplasty Procedures										
	Primary Procedures	0	0		0%						
2	Elective Procedures Total Cardiac Angioplasty Procedures	0	0		0% 0%						
	Total Gardido Aligiopidoty i 100000165	- 0	<u> </u>	"	U 70						
Н.	Electrophysiology Studies										
	Inpatient Studies	0	0	0	0%						
2	Outpatient Studies	0	0		0%						
	Total Electrophysiology Studies	0	0	0	0%						
	Superioral Deconductors										
	Surgical Procedures Inpatient Surgical Procedures	519	448	-71	-14%						
	Outpatient Surgical Procedures	1,905			-14%						
	Total Surgical Procedures	2,424			-17%						
	-	=,:=:									
J.	Endoscopy Procedures										

	NEV	V MILFORD HOSPITAL			
	TWELVE	MONTHS ACTUAL FIL	.ING		
		FISCAL YEAR 2014			
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHER	R SERVICES UTILIZ	ZATION AND FTEs	
(1)	(2)	(3)	(4)	(5)	(6)
(· /	(-/	(0)	(-)	(0)	(•)
		ACTUAL	ACTUAL	AMOUNT	%
IINF	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
		112010	112011	DITTERCENCE	<u>DIII I EIKEINGE</u>
1	Inpatient Endoscopy Procedures	83	113	30	369
2	Outpatient Endoscopy Procedures	1,963	1,945	-18	-19
	Total Endoscopy Procedures	2,046	2,058	12	19
	у того положения	_,0:0	_,,,,,		-
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	2,135	1,984	-151	-79
2	Emergency Room Visits: Treated and Discharged	15,715	14,654	-1,061	-7°
	Total Emergency Room Visits	17,850	16,638	-1,212	-7°
	- Court annotation of the court	,	10,000	-,	<u> </u>
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0'
2	Dental Clinic Visits	0	0	0	0
3	Psychiatric Clinic Visits	8,616	11,634	3,018	35
4	Medical Clinic Visits	0	0	0	0
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0'
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0'
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0'
9	Specialty Clinic Visits	0	0	0	0'
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0'
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0'
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0'
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0
	Total Hospital Clinic Visits	8,616	11,634	3,018	35
М.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	164	268	104	63
2	Cardiac Rehabilitation	1,199	1,372	173	14
3	Chemotherapy	1,052	967	-85	-8
4	Gastroenterology	0	0	0	0
5	Other Outpatient Visits	29,445	14,786	-14,659	-50
	Total Other Hospital Outpatient Visits	31,860	17,393	-14,467	-45
N.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	109.4	90.1	-19.3	-18
2	Total Physician FTEs	2.4	2.2	-19.3	-10 -8
3	Total Non-Nursing and Non-Physician FTEs	250.4	214.7	-35.7	-o -14
J	Total Hospital Full Time Equivalent Employees	362.2	307.0	-55.7 -55.2	-14 -15
	Total Hospital Full Time Equivalent Employees	302.2	307.0	-55.2	-15

OTTIC	E OF FILALITY CARL ACCESS	13 ACTUAL FILING		INLVV	WILL OND HOSPITAL		
	NEW MILFO	RD HOSPITAL					
	TWELVE MONTH	S ACTUAL FILIN	IG				
	FISCAL Y	/EAR 2014					
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EM	ERGENCY RO	OM SERVICES E	BY LOCATION		
(1)	(2)	(3)	(4)	(5)	(6)		
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	<u>FY 2013</u>	<u>FY 2014</u>	DIFFERENCE	DIFFERENCE		
Α.	Outpatient Surgical Procedures						
A.		1.005	1 570	222	170/		
-	The New Milford Hospital Inc Total Outpatient Surgical Procedures(A)	1,905 1,905	1,573 1,573	-332 -332	-17% -17%		
	Total Outpatient Surgical Procedures(A)	1,905	1,573	-332	-17 /0		
В.	Outpatient Endoscopy Procedures						
1	The New Milford Hospital Inc	1,963	1,945	-18	-1%		
	Total Outpatient Endoscopy Procedures(B)	1,963	1,945	-18			
C.	Outpatient Hospital Emergency Room Visits						
1	The New Milford Hospital Inc	15,715	14,654	-1,061	-7%		
	Total Outpatient Hospital Emergency Room Visits(C)	15,715	14,654	-1,061	-7%		
	(A) Must agree with Total Outpatient Surgical Procedures on Report 450.						
	(B) Must agree with Total Outpatient Endoscopy Proced	dures on Report	450.				
	(C) Must agree with Emergency Doom Visita Treated an	d Discharge d s	Donort 150				
	(C) Must agree with Emergency Room Visits Treated an	u Discharged of	i Keport 450.				

FISCAL YEAR 2014

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND DASELINE UNDERFATMENT DAT	A. CONFARAI	IVE ANALISI	3	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	1 1 2013	1 1 2014	DITTERENCE	DITTERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
••	<u> </u>				
Α.	MEDICARE				
	<u></u>				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$29,406,230	\$28,637,366	(\$768,864)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,036,175	\$9,897,956	(\$1,138,219)	-10%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.53%	34.56%	-2.97%	-8%
4	DISCHARGES	1,083	1,047	(36)	-3%
5	CASE MIX INDEX (CMI)	1.33120	1.31880	(0.01240)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,441.68960	1,380.78360	(60.90600)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,655.03	\$7,168.36	(\$486.67)	-6%
8	PATIENT DAYS	4,593	4,570	(23)	-1%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,402.82	\$2,165.85	(\$236.97)	-10%
10	AVERAGE LENGTH OF STAY	4.2	4.4	0.1	3%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$56,105,045	\$51,308,775	(\$4,796,270)	-9%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$12,056,329	\$10,343,081	(\$1,713,248)	-14%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.49%	20.16%	-1.33%	-6%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	190.79%	179.17%	-11.63%	-6%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,066.28880	1,875.88088	(190.40792)	-9%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,834.77	\$5,513.72	(\$321.05)	-6%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$85,511,275	\$79,946,141	(\$5,565,134)	-7%
18	TOTAL ACCRUED PAYMENTS	\$23,092,504	\$20,241,037	(\$2,851,467)	-12%
19	TOTAL ALLOWANCES	\$62,418,771	\$59,705,104	(\$2,713,667)	-4%

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
	AND BAGELINE GROENI ATMENT BAT		10274042101				
		ACTUAL	ACTUAL	AMOUNT	%		
IINF	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE		
	<u> </u>	112010	<u> 20</u>	<u> </u>	<u>DIFF ERCERGE</u>		
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)						
	NON-GOVERNMENT INPATIENT						
1	INPATIENT ACCRUED CHARGES	\$14,041,013	\$11,924,121	(\$2,116,892)	-15%		
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,784,348	\$5,277,319	(\$1,507,029)	-22%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES	48.32%	44.26%	-4.06%	-8%		
4	DISCHARGES	545	458	(87)	-16%		
5	CASE MIX INDEX (CMI)	1.30240	1.37130	0.06890	5%		
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	709.80800	628.05540	(81.75260)	-12%		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,558.00	\$8,402.63	(\$1,155.37)	-12%		
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,902.98)	(\$1,234.27)	\$668.70	-35%		
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,350,748)	(\$775,191)	\$575,557	-43%		
10	PATIENT DAYS	1,705	1,442	(263)	-15%		
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,979.09	\$3,659.72	(\$319.37)	-8%		
12	AVERAGE LENGTH OF STAY	3.1	3.1	0.0	1%		
	NON-GOVERNMENT OUTPATIENT						
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$66,319,496	\$59,490,747	(\$6,828,749)	-10%		
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$35,342,631	\$32,019,841	(\$3,322,790)	-9%		
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	53.29%	53.82%	0.53%	1%		
16	OUTPATIENT CHARGES / INPATIENT CHARGES	472.33%	498.91%	26.58%	6%		
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,574.18217	2,285.01221	(289.16996)	-11%		
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,729.65	\$14,012.98	\$283.33	2%		
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$7,894.88)	(\$8,499.27)	(\$604.39)	8%		
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$20,322,859)	(\$19,420,925)	\$901,934	-4%		
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)						
21	TOTAL ACCRUED CHARGES	\$80,360,509	\$71,414,868	(\$8,945,641)	-11%		
22	TOTAL ACCRUED PAYMENTS	\$42,126,979	\$37,297,160	(\$4,829,819)	-11%		
23	TOTAL ALLOWANCES	\$38,233,530	\$34,117,708	(\$4,115,822)	-11%		
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$21,673,606)	(\$20,196,115)	\$1,477,491	-7%		
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA						
	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$76,994,635	\$68,922,104	(\$8,072,531)	-10%		
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$41,945,973	\$37,105,879	(\$4,840,094)	-12%		
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)						
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,048,662	\$31,816,225	(\$3,232,437)	-9%		
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.52%	46.16%	0.64%			

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$622,422	\$412,623	(\$209,799)	-34%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$41,073	\$47,065	\$5,992	15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	6.60%	11.41%	4.81%	73%
4	DISCHARGES	38	35	(3)	-8%
5	CASE MIX INDEX (CMI)	1.01380	1.10250	0.08870	9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	38.52440	38.58750	0.06310	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,066.16	\$1,219.70	\$153.54	149
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,491.85	\$7,182.94	(\$1,308.91)	-15%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,588.87	\$5,948.67	(\$640.21)	-10%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$253,832	\$229,544	(\$24,288)	-10%
11	PATIENT DAYS	111	117	6	5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$370.03	\$402.26	\$32.24	9%
13	AVERAGE LENGTH OF STAY	2.9	3.3	0.4	149
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,743,452	\$2,080,141	(\$663,311)	-24%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$181,039	\$237,266	\$56,227	31%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	6.60%	11.41%	4.81%	73%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	440.77%	504.13%	63.36%	149
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	167.49276	176.44420	8.95144	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,080.88	\$1,344.71	\$263.83	24%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$12,648.78	\$12,668.28	\$19.50	0%
21	MEDICARE - UNINSURED OP PMT / OPED	\$4,753.90	\$4,169.01	(\$584.89)	-12%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$796,243	\$735,598	(\$60,646)	-8%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$3,365,874	\$2,492,764	(\$873,110)	-26%
24	TOTAL ACCRUED PAYMENTS	\$222,112	\$284,331	\$62,219	28%
25	TOTAL ALLOWANCES	\$3,143,762	\$2,208,433	(\$935,329)	-30%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,050,076	\$965,142	(\$84,934)	-8%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$4,213,322	\$4,500,265	\$286,943	7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,425,738	\$1,375,687	(\$50,051)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.84%	30.57%	-3.27%	-10%
4	DISCHARGES	188	123	(65)	-35%
5	CASE MIX INDEX (CMI)	0.99210	1.18940	0.19730	20%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	186.51480	146.29620	(40.21860)	-22%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,644.10	\$9,403.44	\$1,759.34	23%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$1,913.90	(\$1,000.80)	(\$2,914.71)	-152%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$10.93	(\$2,235.07)	(\$2,246.00)	-20554%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,038	(\$326,983)	(\$329,021)	-16143%
11	PATIENT DAYS	703	668	(35)	-5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,028.08	\$2,059.41	\$31.33	2%
13	AVERAGE LENGTH OF STAY	3.7	5.4	1.7	45%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$13,357,895	\$15,344,001	\$1,986,106	15%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,088,780	\$3,609,723	\$520,943	17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.12%	23.53%	0.40%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	317.04%	340.96%	23.92%	8%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	596.03426	419.37800	(176.65626)	-30%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,182.22	\$8,607.33	\$3,425.11	66%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,547.44	\$5,405.66	(\$3,141.78)	-37%
21	MEDICARE - MEDICAID OP PMT / OPED	\$652.56	(\$3,093.61)	(\$3,746.16)	-574%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$388,945	(\$1,297,390)	(\$1,686,336)	-434%
	MEDICALD TOTAL O (INDATIENT OUTDATIENT)				
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$17,571,217	\$19,844,266	\$2,273,049	13%
24	TOTAL ACCRUED PAYMENTS	\$4,514,518	\$4,985,410	\$470,892	10%
25	TOTAL ALLOWANCES	\$13,056,699	\$14,858,856	\$1,802,157	14%
	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$390,984	(\$1,624,373)	(\$2,015,357)	-515%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	<u>DIFFERENCE</u>		
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)						
	OTHER MEDICAL ASSISTANCE INPATIENT						
1	INPATIENT ACCRUED CHARGES	\$123,882	\$149,801	\$25,919	21%		
2	INPATIENT ACCRUED CHARGES INPATIENT ACCRUED PAYMENTS (IP PMT)	\$41,920	\$45,792	\$3,872	9%		
3	INPATIENT ACCROED FAIMENTS (IF FWIT) INPATIENT PAYMENTS / INPATIENT CHARGES	33.84%	30.57%	-3.27%	-10%		
4	DISCHARGES	33.84%	50.57 %	-3.21 %	0%		
5	CASE MIX INDEX (CMI)	1.11100	1.18940	0.07840	7%		
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6.66600	7.13640	0.47040	7%		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,288.63	\$6,416.68	\$128.05	2%		
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$3,269.38	\$1,985.95	(\$1,283.42)	-39%		
9	MEDICARE - O.M.A. IP PMT / CMAD	\$1,366.40	\$751.68	(\$614.72)	-45%		
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,108	\$5,364	(\$3,744)	-41%		
11	PATIENT DAYS	13	30	(ψ3,7 44)	131%		
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,224.62	\$1,526.40	(\$1,698.22)	-53%		
13	AVERAGE LENGTH OF STAY	2.2	5.0	2.8	131%		
-10			0.0	2.0	10170		
	OTHER MEDICAL ASSISTANCE OUTPATIENT						
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$333,004	\$372,609	\$39,605	12%		
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$77,001	\$87,657	\$10,656	14%		
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.12%	23.53%	0.40%	2%		
17	OUTPATIENT CHARGES / INPATIENT CHARGES	268.81%	248.74%	-20.07%	-7%		
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	16.12844	14.92416	(1.20429)	-7%		
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,774.24	\$5,873.50	\$1,099.26	23%		
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$8,955.42	\$8,139.49	(\$815.93)	-9%		
21	MEDICARE - O.M.A. OP PMT / CMAD	\$1,060.54	(\$359.78)	(\$1,420.32)	-134%		
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$17,105	(\$5,369)	(\$22,474)	-131%		
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE	NT)					
23	TOTAL ACCRUED CHARGES	\$456,886	\$522,410	\$65,524	14%		
24	TOTAL ACCRUED PAYMENTS	\$118,921	\$133,449	\$14,528	12%		
25	TOTAL ALLOWANCES	\$337,965	\$388,961	\$50,996	15%		
00	TOTAL OTHER MEDICAL ACCIOTANCE LIBRER LIMIT LINDERS AVAILABLE	#00 040	/ /	(\$00.040)	4000/		
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$26,213	(\$5)	(\$26,218)	-100%		

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** % LINE DESCRIPTION FY 2013 FY 2014 **DIFFERENCE DIFFERENCE** F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE) TOTAL MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES \$4,337,204 \$4,650,066 \$312,862 7% 2 -3% INPATIENT ACCRUED PAYMENTS (IP PMT) \$1,467,658 \$1,421,479 (\$46,179) 3 INPATIENT PAYMENTS / INPATIENT CHARGES 33.84% 30.57% -3.27% -10% DISCHARGES -34% 194 129 (65)CASE MIX INDEX (CMI) 19% 0.99578 1.18940 0.19362 CASE MIX ADJUSTED DISCHARGES (CMAD) -21% 6 193.18080 153.43260 (39.74820) 7 INPATIENT ACCRUED PAYMENT / CMAD \$7,597.33 \$9,264.52 \$1,667.19 22% 8 NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD -144% \$1,960.68 (\$861.88) (\$2,822.56)9 MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD \$57.70 (\$2,096.16)(\$2,153.86)-3733% INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$321,619)(\$332,765)-2985% 10 \$11,147 PATIENT DAYS 11 -3% 716 (18)INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2,049.80 \$2,036.50 (\$13.30)-1% 12 AVERAGE LENGTH OF STAY 47% 13 3.7 5.4 1.7 TOTAL MEDICAL ASSISTANCE OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS) \$13,690,899 \$15,716,610 \$2,025,711 15% 14 OUTPATIENT ACCRUED PAYMENTS (OP PMT) 17% 15 \$3,165,781 \$3,697,380 \$531,599 **OUTPATIENT PAYMENTS / OUTPATIENT CHARGES** 2% 16 23 12% 23 53% 0.40% **OUTPATIENT CHARGES / INPATIENT CHARGES** 315.66% 337.99% 22.32% 7% 17 -29% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 612.16270 434.30216 (177.86055)65% OUTPATIENT ACCRUED PAYMENTS / OPED \$5,171.47 \$8,513.38 \$3,341.91 19 \$8,558.18 \$5,499.60 -36% 20 NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED (\$3,058.58)MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED \$663.30 (\$2,999.66)(\$3,662.97) -552% -421% OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$406,050 (\$1,302,760)(\$1,708,810)TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) TOTAL ACCRUED CHARGES 13% 23 \$18.028.103 \$20.366.676 \$2,338,573

\$4,633,439

\$13,394,664

\$5,118,859

\$15,247,817

\$485,420

\$1,853,153

10%

14%

24

TOTAL ACCRUED PAYMENTS

TOTAL ALLOWANCES

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE		
G.	CHAMPUS / TRICARE						
	CHAMPUS / TRICARE INPATIENT						
-	INPATIENT ACCRUED CHARGES	\$40,134	\$54,360	\$14,226	35%		
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$37,373	\$20,173	(\$17,200)	-46%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES	93.12%	37.11%	-56.01%	-60%		
-	DISCHARGES	2	2	0	0%		
	CASE MIX INDEX (CMI)	1.16000	1.59000	0.43000	37%		
	CASE MIX ADJUSTED DISCHARGES (CMAD)	2.32000	3.18000	0.86000	37%		
	INPATIENT ACCRUED PAYMENT / CMAD	\$16,109.05	\$6,343.71	(\$9,765.34)	-61%		
	PATIENT DAYS	3	6	3	100%		
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$12,457.67	\$3,362.17	(\$9,095.50)	-73%		
10	AVERAGE LENGTH OF STAY	1.5	3.0	1.5	100%		
	CHAMPUS / TRICARE OUTPATIENT			_			
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$221,308	\$355,009	\$133,701	60%		
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$49,868	\$67,442	\$17,574	35%		
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)			_			
13	TOTAL ACCRUED CHARGES	\$261,442	\$409,369	\$147,927	57%		
14	TOTAL ACCRUED PAYMENTS	\$87,241	\$87,615	\$374	0%		
15	TOTAL ALLOWANCES	\$174,201	\$321,754	\$147,553	85%		
	OTHER RATA						
Н.	OTHER DATA						
1	OTHER OPERATING REVENUE	\$874,400	\$1,006,794	\$132,394	15%		
2	TOTAL OPERATING EXPENSES	\$72,962,299	\$65,083,198	(\$7,879,101)	-11%		
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%		
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)						
4	CHARITY CARE (CHARGES)	\$624,534	\$515,390	(\$109,144)	-17%		
5	BAD DEBTS (CHARGES)	\$2,560,334	\$1,786,094	(\$774,240)	-30%		
6	UNCOMPENSATED CARE (CHARGES)	\$3,184,868	\$2,301,484	(\$883,384)	-28%		
7	COST OF UNCOMPENSATED CARE	\$1,179,264	\$821,406	(\$357,858)	-30%		
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOL	<u>-OGY)</u>					
8	TOTAL ACCRUED CHARGES	\$18,028,103	\$20,366,676	\$2,338,573	13%		
9	TOTAL ACCRUED PAYMENTS	\$4,633,439	\$5,118,859	\$485,420	10%		
10	COST OF TOTAL MEDICAL ASSISTANCE	\$6,675,283	\$7,268,922	\$593,640	9%		
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,041,844	\$2,150,063	\$108,220	5%		

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	<u>FY 2013</u>	FY 2014	DIFFERENCE	DIFFERENCE	
II.	AGGREGATE DATA					
""-	AGGILL DATA					
Α.	TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$47,824,581	\$45,265,913	(\$2,558,668)	-5%	
2	TOTAL INPATIENT PAYMENTS	\$19,325,554	\$16,616,927	(\$2,708,627)	-14%	
3	TOTAL INPATIENT PAYMENTS / CHARGES	40.41%	36.71%	-3.70%	-9%	
4	TOTAL DISCHARGES	1,824	1,636	(188)	-10%	
5	TOTAL CASE MIX INDEX	1.28673	1.32363	0.03689	3%	
6	TOTAL CASE MIX ADJUSTED DISCHARGES	2,346.99840	2,165.45160	(181.54680)	-8%	
7	TOTAL OUTPATIENT CHARGES	\$136,336,748	\$126,871,141	(\$9,465,607)	-7%	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	285.08%	280.28%	-4.80%	-2%	
9	TOTAL OUTPATIENT PAYMENTS	\$50,614,609	\$46,127,744	(\$4,486,865)	-9%	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	37.12%	36.36%	-0.77%	-2%	
11	TOTAL CHARGES	\$184,161,329	\$172,137,054	(\$12,024,275)	-7%	
12	TOTAL PAYMENTS	\$69,940,163	\$62,744,671	(\$7,195,492)	-10%	
13	TOTAL PAYMENTS / TOTAL CHARGES	37.98%	36.45%	-1.53%	-4%	
14	PATIENT DAYS	7,017	6,716	(301)	-4%	
B.	TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$33,783,568	\$33,341,792	(\$441,776)	-1%	
2	INPATIENT PAYMENTS	\$12,541,206	\$11,339,608	(\$1,201,598)	-10%	
3	GOVT. INPATIENT PAYMENTS / CHARGES	37.12%	34.01%	-3.11%	-8%	
4	DISCHARGES	1,279	1,178	(101)	-8%	
5	CASE MIX INDEX	1.28006	1.30509	0.02504	2%	
6	CASE MIX ADJUSTED DISCHARGES	1,637.19040	1,537.39620	(99.79420)	-6%	
7	OUTPATIENT CHARGES	\$70,017,252	\$67,380,394	(\$2,636,858)	-4%	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	207.25%	202.09%	-5.16%	-2%	
9	OUTPATIENT PAYMENTS	\$15,271,978	\$14,107,903	(\$1,164,075)	-8%	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.81%	20.94%	-0.87%	-4%	
11	TOTAL CHARGES	\$103,800,820	\$100,722,186	(\$3,078,634)	-3%	
12	TOTAL PAYMENTS	\$27,813,184	\$25,447,511	(\$2,365,673)	-9%	
13	TOTAL PAYMENTS / CHARGES	26.79%	25.27%	-1.53%	-6%	
14	PATIENT DAYS	5,312	5,274	(38)	-1%	
15	TOTAL GOVERNMENT DEDUCTIONS	\$75,987,636	\$75,274,675	(\$712,961)	-1%	
C.	AVERAGE LENGTH OF STAY					
1	MEDICARE	4.2	4.4	0.1	3%	
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.1	0.0	1%	
3	UNINSURED	2.9	3.3	0.4	14%	
4	MEDICAID	3.7	5.4	1.7	45%	
5	OTHER MEDICAL ASSISTANCE	2.2	5.0	2.8	131%	
6	CHAMPUS / TRICARE	1.5	3.0	1.5	100%	
	TOTAL AVERAGE LENGTH OF STAY	3.8	4.1	0.3	7%	
		0.0		3.0	7 70	

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$184,161,329	\$172,137,054	(\$12,024,275)	-7%
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,987,636	\$75,274,675	(\$712,961)	-1%
3	UNCOMPENSATED CARE	\$3,184,868	\$2,301,484	(\$883,384)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,048,662	\$31,816,225	(\$3,232,437)	-9%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,750,572	\$1,308,484	(\$442,088)	-25%
6	TOTAL ADJUSTMENTS	\$115,971,738	\$110,700,868	(\$5,270,870)	-5%
7	TOTAL ACCRUED PAYMENTS	\$68,189,591	\$61,436,186	(\$6,753,405)	-10%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$68,189,591	\$61,436,186	(\$6,753,405)	-10%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3702709541	0.3569027387	(0.0133682154)	-4%
11	COST OF UNCOMPENSATED CARE	\$1,179,264	\$821,406	(\$357,858)	-30%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,041,844	\$2,150,063	\$108,220	5%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND				
	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,221,108	\$2,971,469	(\$249,639)	-8%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>			
1	MEDICAID	\$388,945	(\$1,297,390)	(\$1,686,336)	-434%
2	OTHER MEDICAL ASSISTANCE	\$26,213	(\$5)	(\$26,218)	-100%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$1,050,076	\$965,142	(\$84,934)	-8%
4	TOTAL CALCULATED UNDERPATMENT (UPPER LIMIT METHODOLOGT)	\$1,465,235	(\$332,253)	(\$1,797,488)	-123%
.,	DATA LICED IN DECONOU LATIONS IN DEPORTS 550 AND 500	`			
V.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,876,575	\$2,084,333	(\$792,242)	-27.54%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$218,542)	(\$937,913)	(\$719,371)	329.17%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$69,721,620	\$61,806,759	(\$7,914,861)	-11.35%
3	NET NEVEROET NOW HOSPITAL AUDITED FINANCIAL STATEMENTS	φυθ,121,020	φυ1,000,759	(\$1,514,001)	-11.33/0
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$184,161,328	\$172,137,054	(\$12,024,274)	-6.53%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$424,398	\$676,198	\$251,800	59.33%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$3,609,267	\$2,977,682	(\$631,585)	-17.50%

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

	BASELINE UNDERPATMENT DATA						
(1)	(2)	(3)	(4)	(5)			
LINE	<u>DESCRIPTION</u>	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT <u>DIFFERENCE</u>			
I.	ACCRUED CHARGES AND PAYMENTS						
Α.	INPATIENT ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,041,013	\$11,924,121	(\$2,116,892)			
	MEDICARE	\$29,406,230	28,637,366	(\$768,864)			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$4,337,204 \$4,213,322	4,650,066 4.500.265	\$312,862 \$286,943			
	OTHER MEDICAL ASSISTANCE	\$123,882	149,801	\$25,919			
	CHAMPUS / TRICARE	\$40,134	54,360	\$14,226			
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$622,422 \$33,783,568	412,623 \$33,341,792	(\$209,799) (\$441,776)			
	TOTAL INPATIENT CHARGES	\$47,824,581	\$45,265,913	(\$2,558,668)			
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$66,319,496	\$59,490,747	(\$6,828,749)			
2	MEDICARE	\$56,105,045	51,308,775	(\$4,796,270)			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$13,690,899	15,716,610	\$2,025,711			
	MEDICAID OTHER MEDICAL ASSISTANCE	\$13,357,895 \$333,004	15,344,001 372,609	\$1,986,106 \$39,605			
	CHAMPUS / TRICARE	\$221,308	355,009	\$133,701			
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,743,452	2,080,141	(\$663,311)			
	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$70,017,252	\$67,380,394	(\$2,636,858)			
	TOTAL OUTPATIENT CHARGES	\$136,336,748	\$126,871,141	(\$9,465,607)			
	TOTAL ACCRUED CHARGES						
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$80,360,509	\$71,414,868	(\$8,945,641)			
	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$85,511,275 \$18,028,103	\$79,946,141 \$20,366,676	(\$5,565,134) \$2,338,573			
	TOTAL MEDICAID	\$17,571,217	\$19,844,266	\$2,273,049			
	TOTAL OTHER MEDICAL ASSISTANCE	\$456,886	\$522,410	\$65,524			
	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$261,442 \$3,365,874	\$409,369 \$2,492,764	\$147,927 (\$873,110)			
	TOTAL GOVERNMENT CHARGES	\$103,800,820	\$100,722,186	(\$3,078,634)			
	TOTAL CHARGES	\$184,161,329	\$172,137,054	(\$12,024,275)			
D.	INPATIENT ACCRUED PAYMENTS						
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,784,348	\$5,277,319	(\$1,507,029)			
	MEDICARE	\$11,036,175	9,897,956	(\$1,138,219)			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$1,467,658 \$1,425,738	1,421,479 1,375,687	(\$46,179) (\$50,051)			
	OTHER MEDICAL ASSISTANCE	\$41,920	45,792	\$3,872			
	CHAMPUS / TRICARE	\$37,373	20,173	(\$17,200)			
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$41,073 \$12,541,206	47,065 \$11,339,608	\$5,992 (\$1,201,598)			
	TOTAL INPATIENT PAYMENTS	\$19,325,554	\$16,616,927	(\$2,708,627)			
	CUITPATIENT ACCOUNT DAVAGENTO						
	OUTPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,342,631	\$32,019,841	(\$3,322,790)			
2	MEDICARE	\$12,056,329	10,343,081	(\$1,713,248)			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,165,781	3,697,380	\$531,599			
	MEDICAID OTHER MEDICAL ASSISTANCE	\$3,088,780 \$77,001	3,609,723 87,657	\$520,943 \$10,656			
	CHAMPUS / TRICARE	\$49,868	67,442	\$17,574			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$181,039	237,266	\$56,227			
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$15,271,978 \$50,614,609	\$14,107,903 \$46,127,744	(\$1,164,075) (\$4,486,865)			
		φ30,014,009	φ⇔υ,1∠1,144	(44,400,000)			
	TOTAL ACCRUED PAYMENTS	Ø40.400.073	#07.007.10	/#4 000 0/S			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) TOTAL MEDICARE	\$42,126,979 \$23,092,504	\$37,297,160 \$20,241,037	(\$4,829,819) (\$2,851,467)			
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,633,439	\$5,118,859	\$485,420			
	TOTAL MEDICALD	\$4,514,518	\$4,985,410	\$470,892			
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$118,921 \$87,241	\$133,449 \$87,615	\$14,528 \$374			
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$222,112	\$284,331	\$62,219			
	TOTAL GOVERNMENT PAYMENTS	\$27,813,184	\$25,447,511	(\$2,365,673)			
\vdash	TOTAL PAYMENTS	\$69,940,163	\$62,744,671	(\$7,195,492)			

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
l	DESCRIPTION			
LINE	DESCRIPTION	<u>FY 2013</u>	<u>FY 2014</u>	DIFFERENCE
77	DAVED MIV			
II.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
7				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7.62%	6.93%	-0.70%
2	MEDICARE	15.97%	16.64%	0.67%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.36%	2.70%	0.35%
4	MEDICAID	2.29%	2.61%	0.33%
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.07% 0.02%	0.09% 0.03%	0.02% 0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%	0.03%	-0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	18.34%	19.37%	1.02%
	TOTAL INPATIENT PAYER MIX	25.97%	26.30%	0.33%
B.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON COVERNMENT (INCLLIDING SELE DAY / LININGLIDED)	20.040/	0.4.5007	4 4507
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	36.01% 30.47%	34.56% 29.81%	-1.45% -0.66%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.43%	9.13%	1.70%
4	MEDICAID	7.45%	8.91%	1.66%
5	OTHER MEDICAL ASSISTANCE	0.18%	0.22%	0.04%
6	CHAMPUS / TRICARE	0.12%	0.21%	0.09%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.49%	1.21%	-0.28%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	38.02%	39.14%	1.12%
	TOTAL OUTPATIENT PAYER MIX	74.03%	73.70%	-0.33%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
	TOTAL FATER WITH BACED ON ACCROED CHARGES	100.00 /6	100.00 /0	0.0070
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9.70%	8.41%	-1.29%
2	MEDICARE	15.78%	15.77%	0.00%
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	2.10%	2.27%	0.17%
5	OTHER MEDICAL ASSISTANCE	2.04% 0.06%	2.19% 0.07%	0.15% 0.01%
6	CHAMPUS / TRICARE	0.05%	0.03%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.06%	0.08%	0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	17.93%	18.07%	0.14%
	TOTAL INPATIENT PAYER MIX	27.63%	26.48%	-1.15%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	50.53%	51.03%	0.50%
2	MEDICARE	17.24%	16.48%	-0.75%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.53%	5.89%	1.37%
4	MEDICAID	4.42%	5.75%	1.34%
5	OTHER MEDICAL ASSISTANCE	0.11%	0.14%	0.03%
6	CHAMPUS / TRICARE	0.07%	0.11%	0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.26%	0.38%	0.12%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.84%	22.48%	0.65%
	TOTAL OUTPATIENT PAYER MIX	72.37%	73.52%	1.15%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
	TOTAL FATER WITH DAOLD ON ACCROED FATIRILITY	100.00%	100.00%	0.00%
	1			

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
.,,	1-7	` '	• • • • • • • • • • • • • • • • • • • •	. ,
LINE	DESCRIPTION	ACTUAL <u>FY 2013</u>	ACTUAL <u>FY 2014</u>	AMOUNT <u>DIFFERENCE</u>
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	<u>DATA</u>		
Α.	<u>DISCHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	545	458	(87)
	MEDICARE	1,083	1,047	(36)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	194	129	(65)
	MEDICAID	188	123	(65)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	6	<u>6</u> 2	-
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	38	35	(3)
	TOTAL GOVERNMENT DISCHARGES	1,279	1,178	(101)
	TOTAL DISCHARGES	1,824	1,636	(188)
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,705	1,442	(263)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,593 716	4,570 698	(23)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	716	668	(35)
	OTHER MEDICAL ASSISTANCE	13	30	17
	CHAMPUS / TRICARE	3	6	3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	111	117	6
	TOTAL GOVERNMENT PATIENT DAYS TOTAL PATIENT DAYS	5,312 7,017	5,274 6,716	(38)
	TOTAL PATIENT DATS	7,017	0,710	(301)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.1	0.0
	MEDICARE	4.2	4.4	0.0
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.7	5.4	1.7
	MEDICAID	3.7	5.4	1.7
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	2.2	5.0	2.8
6 7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.5 2.9	3.0 3.3	1.5 0.4
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.2	4.5	0.3
	TOTAL AVERAGE LENGTH OF STAY	3.8	4.1	0.3
D.	CASE MIX INDEX			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1 20240	4 27420	0.06890
_	MEDICARE	1.30240 1.33120	1.37130 1.31880	(0.01240)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.99578		0.19362
	MEDICAID	0.99210		0.19730
	OTHER MEDICAL ASSISTANCE	1.11100		0.07840
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.16000 1.01380		0.43000 0.08870
	TOTAL GOVERNMENT CASE MIX INDEX	1.28006	1.30509	0.02504
	TOTAL CASE MIX INDEX	1.28673	1.32363	0.03689
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$76,994,635	\$68,922,104	(\$8,072,531)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$41,945,973	\$37,105,879	(\$4,840,094)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	_	•	
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,048,662	\$31,816,225	(\$3,232,437)
	TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	45.52% \$2,876,575	46.16% \$2,084,333	0.64% (\$792,242)
	EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,750,572	\$1,308,484	(\$442,088)
	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$0	\$0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
-	OHCA INPUT) CHARITY CARE	\$604.504	ΦΕΛΕ 000	\$0 (\$100.144)
	BAD DEBTS	\$624,534 \$2,560,334	\$515,390 \$1,786,094	(\$109,144) (\$774,240)
	TOTAL UNCOMPENSATED CARE	\$3,184,868	\$2,301,484	(\$883,384)
11	TOTAL OTHER OPERATING REVENUE	\$874,400	\$1,006,794	\$132,394
12	TOTAL OPERATING EXPENSES	\$72,962,299	\$65,083,198	(\$7,879,101)

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

	DASELINE UNDERFATMENT DATA						
(1)	(2)	(3)	(4)	(5)			
(1)	(2)	(3)	(+)	(3)			
		ACTUAL	ACTUAL	AMOUNT			
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE			
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS						
A.	CASE MIX ADJUSTED DISCHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	709.80800	628.05540	(81.75260)			
2	MEDICARE	1,441.68960	1,380.78360 153.43260	(60.90600) (39.74820)			
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	193.18080 186.51480	146.29620	(40.21860)			
5	OTHER MEDICAL ASSISTANCE	6.66600	7.13640	0.47040			
6	CHAMPUS / TRICARE	2.32000	3.18000	0.86000			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	38.52440	38.58750	0.06310			
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	1,637.19040	1,537.39620	(99.79420)			
	TOTAL CASE MIX ADJUSTED DISCHARGES	2,346.99840	2,165.45160	(181.54680)			
		ŕ	,	, ,			
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,574.18217	2,285.01221	-289.16996			
2	MEDICARE	2,066.28880	1,875.88088	-190.40792			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	612.16270	434.30216	-177.86055			
4	MEDICAID	596.03426	419.37800	-176.65626			
5	OTHER MEDICAL ASSISTANCE	16.12844	14.92416	-1.20429			
6	CHAMPUS / TRICARE	11.02845	13.06141	2.03295			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	167.49276 2,689.47996	176.44420	8.95144 -366.23552			
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	5,263.66213	2,323.24445 4,608.25666	-655.40547			
	TOTAL OUTFATIENT EQUIVALENT DISCHARGES	3,203.00213	4,000.23000	-033.40347			
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE						
<u> </u>	IN THEM I THE OTICE WINT TO COTE DISCONTINGE						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,558.00	\$8,402.63	(\$1,155.37)			
2	MEDICARE	\$7,655.03	\$7,168.36	(\$486.67)			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,597.33	\$9,264.52	\$1,667.19			
4	MEDICAID	\$7,644.10	\$9,403.44	\$1,759.34			
5	OTHER MEDICAL ASSISTANCE	\$6,288.63	\$6,416.68	\$128.05			
6	CHAMPUS / TRICARE	\$16,109.05	\$6,343.71	(\$9,765.34)			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,066.16	\$1,219.70	\$153.54			
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,660.20	\$7,375.85	(\$284.35)			
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,234.16	\$7,673.65	(\$560.50)			
L_	CUITDATICNIT DAYMENT DED CUITDATICNIT FOUNTALIENT DISCUADOS						
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,729.65	\$14,012.98	\$283.33			
2	MEDICARE	\$5,834.77	\$5,513.72	(\$321.05)			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,171.47	\$8,513.38	\$3,341.91			
4	MEDICAID	\$5,182.22	\$8,607.33	\$3,425.11			
5	OTHER MEDICAL ASSISTANCE	\$4,774.24	\$5,873.50	\$1,099.26			
6	CHAMPUS / TRICARE	\$4,521.76	\$5,163.46	\$641.70			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,080.88	\$1,344.71	\$263.83			
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE						
		\$5,678.41	\$6,072.50	\$394.09			
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,615.85	\$10,009.80	\$393.95			

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2014 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA** (1) (2) (3) (4) (5) **ACTUAL ACTUAL AMOUNT** INE DESCRIPTION FY 2013 FY 2014 **DIFFERENCE** CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID \$388 945 (\$1,297,390 (\$1,686,33 OTHER MEDICAL ASSISTANCE \$26.213 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,050,076 \$965,142 (\$84,934 3 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) \$1,465,235 (\$332,253 (\$1,797,488 VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY) \$184,161,329 \$172,137,054 (\$12,024,27 TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS \$75,987,636 \$75,274,675 (\$712,96 2 \$3,184,868 \$2,301,484 3 **UNCOMPENSATED CARE** TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$35,048,662 \$31,816,225 (\$3,232,43 4 EMPLOYEE SELF INSURANCE ALLOWANCE \$1,750,572 \$1,308,484 \$110,700,868 \$115,971,738 6 TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS \$68,189,591 \$61,436,186 UCP DSH PAYMENTS (OHCA INPUT) \$0 8 \$0 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$68,189,591 \$61,436,186 9 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3702709541 0.3569027387 (0.0133682154) 10 COST OF UNCOMPENSATED CARE \$1 179 264 \$821 406 11 12 MEDICAL ASSISTANCE UNDERPAYMENT \$2,041,844 \$2,150,063 \$108,220 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$3,221,108 \$2,971,469 (\$249,63 VII. RATIOS Δ RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 48.32% 44.26% -4.06% 37.53% 34.56% -2.97% MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 33.84% 30.57% -3.27% 3 4 MEDICAID 33.84% 30.57% -3.27% 33.84% -3.27% OTHER MEDICAL ASSISTANCE 30.57% 5 CHAMPUS / TRICARE 93.12% 37 11% -56.01% UNINSURED (INCLUDED IN NON-GOVERNMENT) 6.60% 11.41% 4.81% TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 37.12% 34.01% -3.11% TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 40.41% 36.71% -3.70% RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES B. 53.29% 0.53% NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 53.82% **MEDICARE** 21.49% 20.16% -1.33% 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 23.12% 23.53% 0.40% MEDICAID 23.12% 23.53% 0.40% 4 23.53% 5 OTHER MEDICAL ASSISTANCE 23.12% 0.40% CHAMPUS / TRICARE 22.53% 19.00% -3.54% UNINSURED (INCLUDED IN NON-GOVERNMENT) 6.60% 11.41% 4.81% TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES

TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES

21.81%

37.12%

20.94%

36.36%

-0.87%

-0.77%

	NEW MILFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2014			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2013</u>	ACTUAL FY 2014	AMOUNT <u>DIFFERENCE</u>
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	TIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	S		
1	TOTAL ACCRUED PAYMENTS	\$69.940.163	\$62,744,671	(\$7.195.492)
	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA	ψ09,940,103	Ψ02,744,071	(ψ7,195, 4 92)
	INPUT)	\$0	\$0	
	OHCA DEFINED NET REVENUE	\$69,940,163	\$62,744,671	(\$7,195,492)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$218.542)	(\$937.913)	(\$719.371)
4	CALCULATED NET REVENUE	\$73,407,958	\$61,806,758	(\$11,601,200)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$69,721,620	\$61,806,759	(\$7,914,861)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,686,338	(\$1)	(\$3,686,339)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	\$184.161.329	\$172,137,054	(\$12.024.275)
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$184,161,329	\$172,137,054	(\$12,024,275)
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$184,161,328	\$172,137,054	(\$12,024,274)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1	\$0	(\$1)
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	TS.		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,184,868	\$2,301,484	(\$883,384)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$424.398	\$676,198	\$251,800
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,609,266	\$2,977,682	(\$631,584)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,609,267	\$2,977,682	(\$631,585)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	\$0	\$1

	NEW MILFORD HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2014	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(.,	(-)	ACTUAL
LINE	DESCRIPTION	FY 2014
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,924,121
2	MEDICARE (NO. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	28,637,366
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	4,650,066 4,500,265
5	OTHER MEDICAL ASSISTANCE	149,801
6	CHAMPUS / TRICARE	54,360
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	412,623
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$33,341,792 \$45,265,913
	TOTAL INI ATTENT GITANGEO	φ+0,200,310
В.	OUTPATIENT ACCRUED CHARGES	A
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$59,490,747 51.308.775
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15,716,610
4	MEDICAID	15,344,001
5	OTHER MEDICAL ASSISTANCE	372,609
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	355,009 2,080,141
,	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$67,380,394
	TOTAL OUTPATIENT CHARGES	\$126,871,141
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$71,414,868
2	TOTAL GOVERNMENT ACCRUED CHARGES	100,722,186
	TOTAL ACCRUED CHARGES	\$172,137,054
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,277,319
	MEDICARE	9,897,956
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1,421,479 1.375.687
5	OTHER MEDICAL ASSISTANCE	45,792
	CHAMPUS / TRICARE	20,173
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	47,065
	TOTAL INPATIENT GOVERNMENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$11,339,608 \$16,616,927
	TOTAL IN ATTENT PARTIES	ψ10j010j021
E.	OUTPATIENT ACCRUED PAYMENTS	
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$32,019,841 10,343,081
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,697,380
4	MEDICAID	3,609,723
5	OTHER MEDICAL ASSISTANCE	87,657 67,442
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	67,442 237,266
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$14,107,903
	TOTAL OUTPATIENT PAYMENTS	\$46,127,744
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$37,297,160
2	TOTAL GOVERNMENT ACCRUED PAYMENTS TOTAL ACCRUED PAYMENTS	25,447,511 \$62,744,671
	TO THE AGGREGAT ATTRICTION	Ψ02,1 ++,01 1

	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2014	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
		(3)
(1)	(2)	
		ACTUAL
LINE	DESCRIPTION	FY 2014
П.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
A.	ACCRUED DISCHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	45
	MEDICARE	1,04
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12
	MEDICAID OTHER MEDICAL ASSISTANCE	12
	CHAMPUS / TRICARE	
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3
•	TOTAL GOVERNMENT DISCHARGES	1,17
	TOTAL DISCHARGES	1,63
	CASE MIX INDEX	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.3713
	MEDICARE	1.3188
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1.1894 1.1894
	OTHER MEDICAL ASSISTANCE	1.1894
	CHAMPUS / TRICARE	1.5900
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.1025
	TOTAL GOVERNMENT CASE MIX INDEX	1.3050
	TOTAL CASE MIX INDEX	1.3236
	OTHER REQUIRED DATA	# 00,000,40
	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,922,104 \$37,105,879
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$37,105,078
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$31,816,225
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	46.16%
•		.5.10
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,084,333
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,308,484
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
_	OLIA DITY CA DE	^-
U	CHARITY CARE	\$515,390
8	BAD DEBTS	\$1,786,094
9	TOTAL LINCOMPENSATED CARE	PO 204 40
9	TOTAL UNCOMPENSATED CARE	\$2,301,484
9	TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE	\$2,301,48 ² \$1,006,79 ²

	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2014	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
<u>INE</u>	DESCRIPTION	ACTUAL FY 2014
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$62,744,6
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) OHCA DEFINED NET REVENUE	\$62,744,6
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE CALCULATED NET REVENUE	(\$937,9 \$61,806,7
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$61,806,7
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(3
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1 2	OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$172,137,0
	CALCULATED GROSS REVENUE	\$172,137,0
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$172,137,0
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
2	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$2,301,4 \$676,1
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2,977,6
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$2,977,68
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	!

REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
(-,	(-/	ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	109	127	18	17%
2	Number of Approved Applicants	108	124	16	15%
3	Total Charges (A)	\$624,534	\$515,390	(\$109,144)	-17%
4	Average Charges	\$5,783	\$4,156	(\$1,626)	-28%
5	Ratio of Cost to Charges (RCC)	0.432624	0.394315	(0.038309)	-9%
6	Total Cost	\$270,188	\$203,226	(\$66,962)	
7	Average Cost	\$2,502	\$1,639	(\$863)	-34%
			•	(*	
8	Charity Care - Inpatient Charges	\$85,653	\$53,906	(\$31,747)	-37%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	390,707	302,236	(88,471)	-23%
10	Charity Care - Emergency Department Charges	148,174	159,248	11,074	7%
11	Total Charges (A)	\$624,534	\$515,390	(\$109,144)	-17%
12	Charity Care - Number of Patient Days	16	5	(11)	-69%
13	Charity Care - Number of Discharges	5	3	(2)	-40%
14	Charity Care - Number of Outpatient ED Visits	247	282	35	14%
	Charity Care - Number of Outpatient Visits (Excludes ED				, ,
15	Visits)	545	515	(30)	-6%
В.	Hospital Bad Debts (from HRS Report 500)				
		ФСС4 000	£400.070	(\$40E 040)	200/
1	Bad Debts - Inpatient Services	\$664,889	\$469,679	(\$195,210)	-29%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,811,941	1,155,161	(656,780)	-36%
3	Bad Debts - Emergency Department	83,504	161,254	77,750	93%
4	Total Bad Debts (A)	\$2,560,334	\$1,786,094	(\$774,240)	-30%
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$624,534	\$515,390	(\$109,144)	-17%
2	Bad Debts (A)	2,560,334	1,786,094	(774,240)	-30%
3	Total Uncompensated Care (A)	\$3,184,868	\$2,301,484	(\$883,384)	-28%
4	Uncompensated Care - Inpatient Services	\$750,542	\$523,585	(\$226,957)	-30%
	Uncompensated Care - Outpatient Services (Excludes ED	Ψ100,0-72	Ψ020,000	(ΨΖΖΟ,ΟΟΤ)	30 70
5	Unc. Care)	2,202,648	1,457,397	(745,251)	-34%
6	Uncompensated Care - Emergency Department	231.678	320,502	88,824	38%
7	Total Uncompensated Care (A)	\$3,184,868	\$2,301,484	(\$883,384)	-28%
	rotal offcompensated care (A)	φυ, 104,000	ψ ∠ ,301,404	(4003,304)	-2070

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		NEW MILFORD HOSP	PITAL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	4		
	REPORT 685 - HOSPITAL I	NON-GOVERNMENT GROSS RE	EVENUE, CONTRACTUAL A	ALLOWANCES,	
	ACC	RUED PAYMENTS AND DISCO	UNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
_		FY 2013	FY 2014	()	()
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$76,994,635	\$68,922,104	(\$8,072,531)	-10
2	Total Contractual Allowances	\$35,048,662	\$31,816,225	(\$3,232,437)	-9
	Total Accrued Payments (A)	\$41,945,973	\$37,105,879	(\$4,840,094)	-12
	Total Discount Percentage	45.52%	46.16%	0.64%	1
(A) A	□ ccrued Payments associated with Non-Goverr	nment Contractual Allowances r	must exclude any reductio	n for Uncompensated	I Care.

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) **ACTUAL ACTUAL ACTUAL** LINE DESCRIPTION FY 2012 FY 2013 FY 2014 **Gross and Net Revenue** Α. 1 Inpatient Gross Revenue \$57,109,530 \$47,824,581 \$45,265,913 Outpatient Gross Revenue \$147,272,097 \$136,336,748 \$126,871,141 2 Total Gross Patient Revenue \$204,381,627 \$184,161,329 \$172,137,054 Net Patient Revenue \$81,236,073 \$69,721,620 \$62,064,046 В. **Total Operating Expenses** \$65,083,198 1 **Total Operating Expense** \$88,958,809 \$72,962,299 C. **Utilization Statistics** Patient Days 1 8,537 7,017 6,716 2.288 1.824 1.636 2 Discharges 3 Average Length of Stay 3.7 3.8 4.1 30,552 27,021 25,540 Equivalent (Adjusted) Patient Days (EPD) 4 0 Equivalent (Adjusted) Discharges (ED) 8,188 7,024 6,221 D. Case Mix Statistics 1.15301 1.28673 1.32363 1 Case Mix Index 8,889 Case Mix Adjusted Patient Days (CMAPD) 9,843 9,029 2 2,638 2,165 Case Mix Adjusted Discharges (CMAD) 2,347 3 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 35,227 34,769 33,805 9,441 9,038 8,235 Case Mix Adjusted Equivalent Discharges (CMAED) 5 E. **Gross Revenue Per Statistic** \$23,941 \$26,245 \$25,631 Total Gross Revenue per Patient Day 1 2 Total Gross Revenue per Discharge \$89,328 \$100,966 \$105,218 Total Gross Revenue per EPD \$6,690 \$6,816 \$6,740 3 \$24,960 \$26,220 \$27,669 4 Total Gross Revenue per ED Total Gross Revenue per CMAEPD 5 \$5,802 \$5,297 \$5,092 Total Gross Revenue per CMAED \$21,648 \$20,377 \$20,904 6 Inpatient Gross Revenue per EPD \$1,869 7 \$1,770 \$1,772 Inpatient Gross Revenue per ED \$6,975 \$6,809 \$7,276 8

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (1) (2) (4) (5) (3) ACTUAL ACTUAL ACTUAL LINE DESCRIPTION FY 2012 FY 2013 FY 2014 Net Revenue Per Statistic F. Net Patient Revenue per Patient Day \$9,516 \$9,936 \$9,241 2 Net Patient Revenue per Discharge \$35,505 \$38,225 \$37,936 Net Patient Revenue per EPD \$2,659 \$2,580 \$2,430 3 Net Patient Revenue per ED \$9,921 \$9,926 \$9,976 4 5 Net Patient Revenue per CMAEPD \$2,306 \$2,005 \$1,836 Net Patient Revenue per CMAED \$8,605 \$7,714 \$7,537 G. Operating Expense Per Statistic 1 Total Operating Expense per Patient Day \$10,420 \$10,398 \$9,691 Total Operating Expense per Discharge \$38,881 \$40,001 \$39,782 2 \$2,700 \$2,548 Total Operating Expense per EPD \$2,912 3 4 Total Operating Expense per ED \$10,864 \$10,388 \$10.461 \$1,925 Total Operating Expense per CMAEPD \$2,525 \$2,099 Total Operating Expense per CMAED \$9,423 \$8,073 \$7,903 6 H. **Nursing Salary and Fringe Benefits Expense** \$10,411,751 \$12,057,764 \$8,258,188 Nursing Salary Expense 1 Nursing Fringe Benefits Expense \$2,189,934 2 \$4,328,737 \$3,102,852 Total Nursing Salary and Fringe Benefits Expense \$16,386,501 \$13,514,603 \$10,448,122 Physician Salary and Fringe Expense I. Physician Salary Expense \$268,454 1 \$1,009,436 \$352,875 \$362.388 \$105.162 \$71.189 Physician Fringe Benefits Expense 2 \$458,037 **Total Physician Salary and Fringe Benefits Expense** \$1,371,824 \$339,643 J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense Non-Nursing, Non-Physician Salary Expense \$20,222,169 \$18,201,638 \$16,287,946 2 Non-Nursing, Non-Physician Fringe Benefits Expense \$7,254,980 \$5,424,351 \$4,319,289 Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense \$27,477,149 \$23,625,989 \$20,607,235 K. Total Salary and Fringe Benefits Expense Total Salary Expense \$33,289,369 \$28,966,264 \$24,814,588 1 2 Total Fringe Benefits Expense \$11,946,105 \$8,632,365 \$6,580,412 Total Salary and Fringe Benefits Expense \$45,235,474 \$37,598,629 \$31,395,000

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (1) (2) (4) (5) (3) ACTUAL ACTUAL ACTUAL LINE DESCRIPTION FY 2012 FY 2013 FY 2014 **Total Full Time Equivalent Employees (FTEs)** L. Total Nursing FTEs 129.1 109.4 90.1 Total Physician FTEs 3.8 2.4 2.2 2 Total Non-Nursing, Non-Physician FTEs 287.4 250.4 214.7 Total Full Time Equivalent Employees (FTEs) 420.3 362.2 307.0 M. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$93,399 \$95,171 \$91,656 2 Nursing Fringe Benefits Expense per FTE \$33,530 \$28,362 \$24,306 Total Nursing Salary and Fringe Benefits Expense per FTE \$126,929 \$123,534 \$115,961 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$265,641 \$147,031 \$122,025 Physician Fringe Benefits Expense per FTE \$95,365 \$43,818 \$32,359 2 3 Total Physician Salary and Fringe Benefits Expense per FTE \$361,006 \$190,849 \$154,383 Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Ο. Non-Nursing, Non-Physician Salary Expense per FTE \$70,362 \$72,690 \$75,864 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$25,243 \$21,663 \$20,118 2 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE \$95,606 \$94,353 \$95,982 3 P. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$79,204 \$79,973 \$80,829 1 2 Total Fringe Benefits Expense per FTE \$28,423 \$23,833 \$21,435 Total Salary and Fringe Benefits Expense per FTE \$107,627 \$103.806 \$102,264 3 Q. Total Salary and Fringe Ben. Expense per Statistic 1 Total Salary and Fringe Benefits Expense per Patient Day \$5,299 \$5,358 \$4,675 Total Salary and Fringe Benefits Expense per Discharge \$19,771 \$20,613 \$19,190 2 Total Salary and Fringe Benefits Expense per EPD \$1,391 3 \$1,481 \$1,229 Total Salary and Fringe Benefits Expense per ED \$5,046 4 \$5,524 \$5,353 Total Salary and Fringe Benefits Expense per CMAEPD \$1,284 \$1,081 \$929 5 Total Salary and Fringe Benefits Expense per CMAED \$4,791 \$4,160 \$3,812 6